

Exhibit 1

**UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

IN RE UNIVERSITY GENERAL HEALTH SYSTEM, INC. <i>et al.</i>, <p style="text-align: center;">Debtors.</p>	§ § § § § § §	Confirmed Chapter 11 Case No. 15-31086 Jointly Administered
--	---------------------------------	--

**DECLARATION OF MICHAEL D. WARNER, ESQ., LIQUIDATING TRUSTEE
IN SUPPORT OF THE LIQUIDATING TRUSTEE’S OBJECTION
TO THE ADMINISTRATIVE EXPENSE CLAIM FILED
BY COMMUNITY PATHOLOGY P.L.L.C.**

I, MICHAEL D. WARNER, ESQ., of full age, hereby declare under penalty of perjury, pursuant to 28 U.S.C. § 1746, that the following statements made by me in this Declaration are true and correct to the best of my knowledge, information, and belief, and to the extent that I do not have firsthand knowledge of certain events, I provide my statements herein based upon my review of pleadings filed in these Cases:

1. I am the Liquidating Trustee appointed for University General Health System, Inc., *et al.*, pursuant to the *Joint Chapter 11 Plan of Liquidation*, confirmed pursuant to that certain *Order Confirming Joint Chapter 11 Plan of Liquidation* [Docket No. 799], and that certain Liquidating Trust Agreement, entered into on February 4, 2016, and I am authorized to make this Declaration in support of the *Liquidating Trustee’s Objection* (the “**Objection**”) to the *Administrative Expense Claim* (the “**Claim**”) *Filed by Community Pathology P.L.L.C.* (the “**Claimant**”) [Docket No. 884].¹

¹ Capitalized terms used but not otherwise defined herein shall have the meanings ascribed to such terms in the Objection.

2. This Declaration is submitted pursuant to Local Rule 3007-1(b) of the Bankruptcy Local Rules for the United States Bankruptcy Court for the Southern District of Texas.

3. On February 24, 2016, the Claimant filed the Claim in the amount of \$22,416.07 [Docket No. 884]. A copy of the Claim is attached hereto as “**Exhibit A.**”

4. I have reviewed the Claim and the documents provided in support thereof and have concluded that cause exists to expunge the Claim because a portion of the invoices submitted in support of the Claim (the “**40 Day Entries**”) are obligations of Foundation and not the Debtors. Furthermore, the remainder of the invoices submitted in support of the Claim lack sufficient information to determine whether they are the obligations of Foundation or the Debtors (the “**Disputed Entries**”) and the Claimant has therefore failed to establish a *prima facie* claim for payment of the Disputed Entries thus warranting their expungement.

5. More specifically, pursuant to the Plan Documents, accounts payable related to the Transferred Assets that became due in the ordinary course of the Debtors’ business within 40 days of the Closing Date (*to wit*, on or after November 21, 2015) are the sole responsibility of Foundation.

6. The 40 Day Entries, identified on “**Exhibit B**” to this declaration, aggregate to \$8,383.76 and are the responsibility of Foundation pursuant to the Plan Documents.

7. Thus the Claim should be reduced by \$8,383.76 to reflect Foundation’s obligation for the 40 Day Entries.

8. The Disputed Entries, identified on “**Exhibit C**” to this declaration, aggregate to \$14,032.31. The Claim contains insufficient information to determine when the Disputed Entries became due, since they are for services rendered prior to November 21, 2015 but the invoices on which they are billed do not contain due dates or net terms.

9. Because the Claimant has failed to substantiate that the Disputed Entries are the responsibility of the Debtors' estates, the Trustee objects to the allowance of the Disputed Entries.

10. Thus the Claim should be expunged because the Debtors' estates are not responsible for the 40 Day Entries and the Claimant has failed establish that the Debtors' estates are responsible for the remaining \$14,032.31 in Disputed Entries.

11. An omnibus hearing to address the Trustee's objections to Administrative Claims, including this Objection, has been scheduled for July 11, 2016 [Docket No. 996].

Dated May 23, 2016
Fort Worth, Texas

/s/ Michael D. Warner

Michael D. Warner

Exhibit A

**IN THE UNITED STATE BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

IN RE:	§	CASE NO. 4:15-31086
	§	
UNIVERSITY GENERAL HEALTH SYSTEM, INC., et al.	§	CHAPTER 11
	§	
DEBTORS¹	§	JOINTLY ADMINISTERED
	§	

**MOTION FOR PAYMENT OF POST-PETITION ADMINISTRATIVE EXPENSE
OWED TO COMMUNITY PATHOLOGY P.L.L.C.**

THIS MOTION SEEKS AN ORDER THAT MAY ADVERSELY AFFECT YOU. IF YOU OPPOSE THE MOTION, YOU SHOULD IMMEDIATELY CONTACT THE MOVING PARTY TO RESOLVE THE DISPUTE. IF YOU AND THE MOVING PARTY CANNOT AGREE, YOU MUST FILE A RESPONSE AND SEND A COPY TO THE MOVING PARTY. YOU MUST FILE AND SERVE YOUR RESPONSE WITHIN 21 DAYS OF THE DATE THIS WAS SERVED ON YOU. YOUR RESPONSE MUST STATE WHY THE MOTION SHOULD NOT BE GRANTED. IF YOU DO NOT FILE A TIMELY RESPONSE, THE RELIEF MAY BE GRANTED WITHOUT FURTHER NOTICE TO YOU. IF YOU OPPOSE THE MOTION AND HAVE NOT REACHED AN AGREEMENT, YOU MUST ATTEND THE HEARING. UNLESS THE PARTIES AGREE OTHERWISE, THE COURT MAY CONSIDER EVIDENCE AT THE HEARING AND MAY DECIDE THE MOTION AT THE HEARING.

REPRESENTED PARTIES SHOULD ACT THROUGH THEIR ATTORNEYS.

**THIS MOTION HAS BEEN SET FOR HEARING ON JANUARY 11, 2016
AT 1:00PM.**

**TO THE HONORABLE LETITIA Z. PAUL,
UNITED STATES BANKRUPTCY JUDGE:**

¹ The Debtors and the last four digits of their respective taxpayer identification numbers are as follows: University General Health System, Inc. (2436), UGHS Autimis Billing, Inc. (3352), UGHS Autimis Coding, Inc. (3425), UGHS ER Services, Inc. (6646), UGHS Hospitals, Inc. (3583), UGHS Management Services, Inc. (4100), UGHS Support Services, Inc. (3511), University General Hospital, LP (7964), and University Hospital Systems, LLP (3778).

Community Pathology, P.L.L.C. (Community Pathology) hereby requests an Order granting allowance and payment of an administrative expense claim for outstanding fees invoiced for pathology services provided by Community Pathology to the Debtors, University General Health System, Inc., UGHS Autimis Billing, Inc., UGHS Autimis Coding, Inc., UGHS ER Services, Inc., UGHS Hospitals, Inc., UGHS Management Services, Inc., UGHS Support Services, Inc., University General Hospital, LP, and University Hospital Systems, LLP (collectively, the “Debtors”). This claim is made pursuant to 11 U.S.C. §503(b)(1)(A), and in support thereof, Community Pathology respectfully states as follows:

JURISDICTION AND VENUE

1. This Court has jurisdiction over this matter pursuant to 28 U.S.C. §§ 157 and 1334. This proceeding is a core proceeding pursuant to 28 U.S.C. §157. Venue is proper in this Court pursuant to 28 U.S.C. §§1408 and 1409.
2. The statutory predicate for the relief requested is section 503(b)(1)(A) of Title 11 of the United States Code (the “Bankruptcy Code”).

BACKGROUND

3. On February 27, 2015 (the “Petition Date”), Debtors filed a petition for relief pursuant to Chapter 11 of the Bankruptcy Code (the “Bankruptcy Code”) in the United States Bankruptcy Court for the Southern District of Texas (the “Court”). Among the other Debtors in this jointly administered case is University General Hospital, L.P. (UGH LP). UGH LP entered several agreements with Community Pathology as part of normal business operations, two of which are the subject of this Application and more fully described below.
4. Histology Agreement: Prior to the Petition Date, Community Pathology and UGH LP entered the Histology Processing and Transcription Agreement (“Histology Agreement”), with

an effective date of September 1, 2006. The purpose of the Histology Agreement was to provide for quality pathology services at Debtors' main hospital campus at 7501 Fannin Street, Houston, Texas at a reasonable cost to its patients, to promote efficient hospital operations, and to meet legal obligations related to the stabilization and treatment of patients. Under the Histology Agreement, Community Pathology provided, and continues to provide, specialist physician services and full-service clinical and administrative services to Debtors and their patients at the hospital. Specifically, Community Pathology provides clinical and histology transcription services for the benefit of Debtors' patients at the hospital.² Community Pathology bills these patients (or payors under managed care contracts) directly for the services provided, except in cases of Medicare, Medicaid and other government-funded inpatient participants. For that group (Medicare, Medicaid, etc.), Community Pathology bills UGH LP on a monthly basis, who in turn submits billing on behalf of the patient to the applicable government entity for payment. The Histology Agreement was extended on two occasions, with a current expiration date of January 31, 2017. The Histology Agreement and its Addendums are attached as **Exhibit 1** and are collectively referred to as the Histology Agreement.

5. UGH LP did not pay Community Pathology in full for the services provided by Community Pathology on behalf of the Medicare, Medicaid, and Tricare patients under the Histology Agreement. As reflected in the Histology Agreement, UGH LP owed significant amounts at the time of the Petition. And UGH LP continued to fail to meet its payment obligations to Community Pathology post-Petition. Invoices for the time period of March 2015-September 2015 have been presented to UGH LP, for a total amount of \$68,981.55 due and owing post-Petition Date. No payments have been made on this account since the Petition Date,

² Histology is the science concerned with the minute structure of tissues and organs in relation to their function. Histology typically involves examination of a thin slice of tissue under a light microscope.

leaving the balance of \$68,981.55 to be paid as an administrative expense to Community Pathology. A summary of the March 2015-September 2015 invoices and the redacted invoices are attached as **Exhibit 2**.³

6. PSA: Community Pathology and UGH, LP also entered a Professional Services Agreement (“PSA”), effective on August 1, 2011. Under the PSA, Community Pathology was retained to provide pathology services at Debtor’s main hospital campus at 7501 Fannin Street, Houston, Texas for a term of five (5) years. The PSA further provides for a Medical Director of Services, provided by Community Pathology, who is to provide oversight and administration of the clinical pathology services performed. While the PSA generally provides for UGH LP and Community Pathology to independently bill patients and each collect the charges due to them, with respect to services provided on behalf of Medicare/Medicaid patients, the parties agreed to a Medical Director Fee (“Fee”) of \$2,500 per month to be paid by UGH LP to Community Pathology. This Fee specifically covers the oversight and administration of the clinical pathology services performed by the hospital laboratory on behalf of the Medicare/Medicaid patients. The Fee is to be paid monthly and is due within thirty (30) days of the prior month’s admissions. The PSA is filed under seal as **Exhibit 3**.

7. UGH LP has failed to pay in full for the Medical Director services provided by Community Pathology. UGH LP was past-due on its payments prior to the Petition Date and has continued to fail to meet its post-Petition obligations. Post-Petition invoices for March 2015-November 2015 have been presented to UGH LP, for a total amount of \$22,500 invoiced since the Petition Date. UGH LP paid only \$7,500 on this account, leaving a balance of \$15,000

³ Redactions were made for Protected Health Information (PHI).

payable as an administrative expense to Community Pathology. These invoices are attached as **Exhibit 4.**

8. Debtors agree that UGH LP is in default of its post-Petition obligations under the PSA and General Histology Agreements. UGH LP does not dispute the total amounts currently due, of \$68,981.55 and \$15,000.00, for a total of \$83,981.55. UGH LP agrees these amounts should be paid as an administrative expense claim to Community Pathology.

9. Community Pathology and UGH LP agree that UGH LP will satisfy these administrative expense claims within five (5) days of an order being entered granting this application, whichever occurs later.

RELIEF REQUESTED AND ANALYSIS

10. As a result of the PSA and Histology Agreement and Community Pathology's continued provision of pathology services post-Petition according to these agreements, Debtors continued to provide clinical pathology services to patients at its main hospital campus during the pendency of the Chapter 11 proceeding in this Court. In other words, the hospital operated without any interruption in the pathology services that would have otherwise been furnished to its patients or medical staff by virtue of its agreements with Community Pathology.

11. By this Application, Community Pathology and UGH LP request the entry of an Order approving the parties agreement to pay Community Pathology's administrative expense claim pursuant to section 503(b)(1) of the Bankruptcy Code for the services it provided under the PSA and General Histology agreements (the "Administrative Expense").

12. Section 503(b)(1)(A) of the Bankruptcy Code provides, in pertinent part:

After notice and a hearing, there shall be allowed, administrative expenses, other than claims allowed under section 502(f) of this title, including—

(1) (A) the actual, necessary costs and expenses of preserving the estate including—

(i) wages, salaries, and commissions for services rendered after the commencement of the case; and

* * *

14. To qualify as an “actual and necessary cost” under § 503(b)(1)(A) of the Bankruptcy Code, a claim against the estate “must have arisen post-petition and as a result of actions taken by the trustee that benefitted the estate.” *In re Home Interiors & Gifts, Inc.*, No. 08-31961-11-BJH, 2008 WL 4772102, at *4 (Bankr. N.D. Tex. Oct. 9, 2008). “A prima facie case [entitling the creditor to payment] under § 503(b)(1) may be established by evidence that (1) the claim arises from a transaction with the debtor-in-possession; and (2) the goods or services supplied enhanced the ability of the debtor-in-possession’s business to function as a going concern.” *Toma Steel Supply, Inc. v. TransAmerican Natural Gas Corp. (In re TransAmerican Natural Gas Corp.)*, 978 F.2d 1409, 1416 (5th Cir. 1992). It is undisputed that the administrative expenses sought here arise from post-petition transactions between Community Pathology and Debtors. A claimant’s performance of a pre-petition contract and the debtor’s acceptance of that performance establishes a post-petition transaction. *See, e.g., In re Goody’s Family Clothing, Inc.*, 401 B.R. 656, 671 (D. Del. 2009) (citing *In re White Motor Corp.*, 831 F.2d 106, 110 (6th Cir. 1987)). As indicated above, Community Pathology’s services enhanced the Debtors’ ability to function as a going concern by ensuring the continued provision of clinical pathology services for patients cared for at its main hospital campus.

15. Community Pathology’s post-petition Services under the PSA and General Histology Agreements constitute “actual and necessary costs” of the estate and, therefore, are entitled to priority before other, unsecured nonpriority claims. *See* § 507(a)(1); *Total Minatome Corp. v. Jack/Wade Drilling, Inc. (In re Jack/Wade Drilling, Inc.)*, 258 F.3d 385, 387 (5th Cir. 2001).

16. Community Pathology and Debtors agree that the invoice amounts evidence the reasonable value of the services provided under the agreements.

WHEREFORE, Community Pathology, P.L.L.C. requests entry of an Order: (i) allowing it an Administrative Expense Claim in the total amount of \$83,981.55 pursuant to section 503(b)(1) of the Bankruptcy Code; (ii) directing the Debtors to pay Community Pathology, P.L.L.C.'s Administrative Expense Claim within five (5) days of the Court's order granting this application, and prior to any distribution or payment by the Debtors to holders of claims that are junior in priority to the Administrative Expense pursuant to section 507 of the Bankruptcy Code; and (iii) such other and further relief as is just and equitable.

DATED: December 17, 2015

Respectfully submitted,

FERNELIUS ALVAREZ SIMON PLLC

By /s/ Graig J. Alvarez

Graig J. Alvarez
Attorney-in-Charge
State Bar No. 24001647
Federal I.D. No. 22596
1221 McKinney, Suite 3200
Houston, Texas 77010-3095
Email: galvarez@fa-lawfirm.com
Kara Stauffer Philbin
State Bar No. 24056373
Federal I.D. No. 685342
Email: kphilbin@fa-lawfirm.com
Telephone: 713-654-1200
Telecopier: 713-654-4039

ATTORNEYS FOR
Baylor College of Medicine,
Baylor Pathology Consultants, and
Community Pathology, P.L.L.C.

CERTIFICATE OF SERVICE

I hereby certify that all attorneys of record who have consented to electronic service are being served this 17th day of December, 2015, with a true and correct copy of this document via the Court's CM/ECF system, and that this motion was otherwise served by ECF or first-class United State mail.

/s/ Kara Stauffer Philbin
Kara Stauffer Philbin

Exhibit 1

HISTOLOGY PROCESSING AND TRANSCRIPTION AGREEMENT

This Histology Processing and Transcription Agreement (this "Agreement") is effective as of September 1, 2006 (the "Effective Date"), by and between University General Hospital, L.P., a Texas limited partnership ("Hospital"), and Community Pathology, P.L.L.C., a Texas professional limited liability company ("Group").

WHEREAS, Hospital has determined that in order to provide good quality pathology services at Hospital for its patients at a reasonable cost, to promote efficient hospital operations, and to meet legal obligations to stabilize and treat patients pursuant to state and federal transfer laws, it is necessary to secure an exclusive contract for histology processing and transcription services, with a full-service pathology group; and

WHEREAS, Group is a Texas professional limited liability company and utilizes the services of physicians engaged in the practice of medicine who are specialists in the provision of pathology services and who desire to provide good quality full-service clinical and administrative services to the patients, medical staff and administration of Hospital.

NOW, THEREFORE, for and in consideration of the premises and of the mutual covenants and agreements herein contained, the parties hereto agree as follows:

I. DEFINITIONS

When used in this Agreement, the following terms shall have the meanings ascribed thereto in this Section, unless otherwise clearly required by the context in which such term is used:

1.1 "Board" shall mean the Board of Directors of Hospital.

1.2 "Chief Executive Officer" shall mean the person holding the position titled Administrator of Hospital or such other title as may be adopted to describe the executive exercising overall authority with respect to the day to day operation and management of Hospital or his designee.

1.3 "Department" shall mean the Pathology Department of Hospital Facility.

1.4 "Hospital" shall mean the University General Hospital, a Texas limited partnership.

1.5 "Hospital Facility" shall mean and refer to the acute care hospital facility owned and operated by Hospital, located at 7501 Fannin, Houston, Texas 77030

1.6 "Medical Director" shall mean the physician who is an employee of Group and approved by Hospital's Chief Executive Officer in writing.

1.7 "Medical Staff" shall mean the organized Medical Staff of Hospital.

1.8 "Patients" shall mean the inpatients, outpatients and emergency room patients of Hospital and, in accordance with Hospital Policies, may include patients for whom Hospital services are provided but who are not classified as either inpatients or outpatients of Hospital.

1.9 "Hospital Policies" shall mean the articles of incorporation, bylaws, rules, regulations, guidelines, and policies of Hospital, the Medical Staff of Hospital and the rules, protocols and guidelines for pathology services at Hospital Facility as may be in effect from time to time.

II. SCOPE OF AGREEMENT

This Agreement shall apply to Hospital Facility and any other locations mutually agreed to by Group and Hospital.

III. EXCLUSIVE APPOINTMENT

3.1 In order to enhance quality patient care, promote efficient hospital operations and assist Hospital in meeting its legal obligations to stabilize and treat patients pursuant to the state and federal transfer laws, Hospital appoints Group as the exclusive provider for histological processing and transcription services at Hospital's main campus located at 7501 Fannin Street, Houston, Texas. Following a review of issues with Group, Hospital shall have the right to reject any physician provided by Group by giving thirty (30) days advance notice to Group.

3.2 Group shall designate to Hospital an agent of Group with authority to bind Group with respect to all questions under and relating to this Agreement, and Hospital shall be entitled to rely in all matters upon and Group shall be bound by the representations of and agreements by such agent on behalf of Group.

IV. PHYSICIAN QUALIFICATIONS

Each physician employee of Group who provides clinical and histology services to patients of Hospital, the Medical Staff and administration of Hospital hereunder must maintain the following qualifications throughout the term of this Agreement:

4.1 Unrestricted State of Texas Medical license;

4.2 Board certification from the American Board of Pathology, or Board eligible and be actively pursuing Board certification with said Board;

4.3 Medical Staff membership in good standing with unrestricted clinical privileges appropriate for the practice of full-service pathology services at Hospital;

4.4 Unrestricted right to participate in federal health care programs including Medicare and/or Medicaid.

V. RESPONSIBILITIES OF GROUP

5.1 Services. Hospital hereby engages Group to provide histology and transcription services for patients of Hospital. Group shall provide such pathology services in accordance with the terms of this Agreement.

5.2 Clinical Responsibilities. Group shall provide the following services:

5.2.1 Provide histology and transcription services in a timely manner on a twenty-four (24) hour, seven days per week, year round basis, for all patients of Hospital on a non-discriminatory basis;

5.2.2 Provide procedures and evaluation on a timely basis in order to provide quality patient care and to facilitate treatment schedules;

5.2.3 Provide patient care in accordance with the standards of care applicable to pathology services in the community served by Hospital Facility;

5.2.4 Group shall, except as otherwise provided by Hospital Policies, cause histology services to be conveniently available to Hospital staff and all patients of the Department during normal working hours and shall ensure that pathology services are available subject to timely call-back during other periods. Group shall establish schedules for all services provided by Group to the end that quality patient care and the safety and needs of patients and their attending physicians take precedence over the convenience of Group or other concerns. Without limiting the generality of the foregoing, Group shall assure that histology services and other services of the Department are promptly available to other departments of Hospital; and

5.2.5 Group shall make all best efforts to enter into managed care contracts with all managed care payors with which Hospital has managed care contracts in order that Hospital services and pathology services may be provided to all insureds and/or contractors covered under managed care contracts of Hospital. Group shall comply with the terms and conditions of such managed care contracts, including those regarding discount prices, DRG's, capitated compensation, and such other terms and conditions as may apply. Group understands and acknowledges that the full cooperation of Group in the prompt agreement to and cooperation with Hospital in the negotiation of such managed care contracts is of the utmost importance to the future business of Hospital and Group. In the event of any disagreements regarding the terms of such contracts which are not resolved within 30 days, Group agrees to abide by the terms and conditions, including compensation for services, approved and accepted by Hospital or its successor. Group further agrees to provide care on a non-discriminatory basis to patients of Hospital who are covered by Medicare, Medicaid and similar government programs as well as to the indigent, with the status of indigency being determined by Hospital Policies as are in effect from time to time. Group shall not be required to enter into any managed care contract that offers anatomical pathology compensation less than 100% of Medicare allowable rates.

5.3 Administrative Services. Group shall provide the following:

5.3.1 Group is not authorized to and shall not engage in direct purchasing or otherwise contract any liability on behalf of Hospital and shall neither charge the credit of Hospital nor incur any obligations to enter into any agreement for or on behalf of Hospital in the operation of the Department or otherwise;

5.3.2 Group shall advise Hospital with respect to the selection of additional and replacement equipment for the Department. Group shall periodically inspect and evaluate all equipment to determine whether it is being maintained in a safe condition and shall perform all repair or maintenance of such equipment. -

5.4 Physician Responsibilities. Group shall perform all services under this Agreement, and conduct all operations of Hospital in strict accordance with all of the following, as may from time to time be in effect:

5.4.1 The laws, rules, regulations, and ordinances, and judicial and administrative interpretations thereof of the United States, the State of Texas and all political subdivisions, agencies, and instrumentalities of any of them, including but not limited to Medicare, Medicaid and federal health care programs;

5.4.2 The standards and recommendations of the Joint Commission and the College of American Pathologists;

5.4.3 Hospital Policies, Hospital Compliance Plan, Code of Conduct and Compliance Policies, as defined hereinabove;

5.4.4 All standards of professional conduct and ethics, including, but not limited to, the standards, rules, regulations, opinions, and decisions promulgated by:

- (i) The American Medical Association;
- (ii) The Texas Medical Association;
- (iii) The Harris County Medical Society;
- (iv) The Texas State Board of Medical Examiners; and
- (v) The American Board of Pathology.

Group and the Medical Director further agree to cause all non-physician employees and/or contractors under their control to comply with all applicable standards contained in this Section.

VI. RESPONSIBILITIES OF HOSPITAL

The ownership and right of control of all reports, records, and supporting documents prepared in connection with the operation of the Department shall vest exclusively in Hospital; provided, however, Group shall have such right of timely access to such reports, records and

supporting documentation as shall be required by state and federal law and Hospital Policies and for billing purposes.

VII. INDEPENDENT CONTRACTOR

It is mutually understood and agreed that in the performance of services under this Agreement, Group and its physicians are at all times acting as independent contractors in the practice of the profession of medicine. The Group physicians shall employ their own means and methods and exercise their own professional judgment in the performance of such services, and shall not be subject to the control or direction of Hospital with respect to such means, methods, or judgments, or with respect to the details of such services. The sole concern of Hospital under this Agreement or otherwise is that, irrespective of the means selected, such services be provided in a competent, efficient, and satisfactory manner. It is expressly agreed that Group and its physicians shall not be deemed to be employees, agents, ostensible or apparent agents, servants, partners or joint venturers of Hospital. Group shall be solely responsible for all compensation and fringe benefits payable to its physicians, and all taxes with regard to such compensation are the responsibility of Group.

VIII. INSURANCE

8.1 At no cost to Hospital, Group shall procure and maintain in effect throughout the term of this Agreement, professional liability insurance coverage in the amount of \$1,000,000 per claim and \$3,000,000 in the aggregate covering Group and each Group physician providing services pursuant to this Agreement, general commercial liability insurance from an insurance company or self-insurance reasonably satisfactory to Hospital providing coverage of at least \$1,000,000 combined single limit per occurrence for bodily injury, disease, illness, and death at any time occurring therefrom and property damage and a minimum \$1,000,000 per year aggregate limit, and worker's compensation insurance and employers' liability insurance complying with the laws of the State of Texas, issued by an insurance company or self-insurance reasonably acceptable to Hospital. Group agrees to indemnify, defend, and hold harmless from any loss, attorneys fees, court and other costs arising out of or in any way connected with services rendered by Group to Hospital under this agreement which are proximately caused by negligence or willful misconduct of Group.

8.2 At no cost to Group, Hospital shall procure and maintain in effect throughout the term of this Agreement, professional liability insurance coverage in the amount of \$100,000 per claim and \$300,000 in the aggregate covering Hospital and Hospital employed personnel, general commercial liability insurance from an insurance company or self-insurance reasonably satisfactory to Group providing coverage of at least \$100,000 combined single limit per occurrence for bodily injury, disease, illness, and death at any time occurring therefrom and property damage and a minimum \$300,000 per year aggregate limit, and worker's compensation insurance and employers' liability insurance complying with the laws of the State of Texas, issued by an insurance company or self-insurance reasonably acceptable to Group. Hospital agrees to indemnify, defend, and hold harmless from any loss, attorneys fees, court and other costs arising out of or in any way connected with the services rendered by Hospital to Group

under this Agreement which are proximately caused by the negligence or willful misconduct of Hospital.

IX. RESPONSIBILITIES OF THE PARTIES

Each party hereto shall be solely responsible for performance of its own services for patients, and neither shall be liable for the actions or omission of the other party hereto.

X. TERM AND TERMINATION

10.1 Initial Term. This Agreement shall be effective as of the Effective Date even though it may be finally executed and delivered on a subsequent date, and shall have a term of four (4) years and eleven (11) months. Unless sooner terminated as provided herein, the Term shall expire and this Agreement shall be of no further force and effect as of the end of business on July 31, 2011.

10.2 Renegotiation. On the 120th day prior to expiration of the term of this Agreement, this Agreement shall be subject to review at the request of either party hereto. During this review period the parties agree to use all reasonable efforts to meet together at mutually agreeable times to discuss the renewal and, if necessary, renegotiation of one or more of the terms hereof. In the event the parties do not agree to the extension and/or modification of this Agreement, this Agreement shall terminate on the expiration of the term set forth above.

10.3 Termination. The Agreement may be sooner terminated on the first to occur of the following;

10.3.1 Termination by Agreement. In the event Hospital and Group shall mutually agree in writing, this Agreement may be terminated on the terms and date stipulated therein.

10.3.2 Termination for Default. In the event either party shall give notice to the other that such other party has substantially defaulted in the performance of any obligation under this Agreement and such default is not cured within thirty (30) days following the giving of such notice, the party giving such notice shall have the right to immediately terminate this Agreement.

Hospital must give Group at least thirty (30) days written notice of any failure of a Group physician to treat patients covered by managed care contracts with Hospital and Group prior to Hospital terminating such a physician from performing services under this Agreement.

10.3.3 Termination Without Cause. Neither party may terminate this Agreement without cause during the first twenty-four (24) months following the Effective Date. After the expiration of the first twenty-four (24) months, either party may terminate this Agreement without cause by providing not less than one hundred eighty (180) days prior written notice stating the intended date of termination.

10.4 Effects of Termination. Upon termination of this Agreement, as hereinabove

provided, neither party shall have any further obligations hereunder except for obligations arising prior to the date of termination, and obligations, promises, or covenants contained herein which are expressly made to extend beyond the term of this Agreement.

XI. NOTICES

Except as otherwise provided herein, all notices, requests, demands and other communications required or permitted to be given hereunder shall be in writing and shall be deemed to have been duly given if delivered personally, given by prepaid, registered or certified mail to the party to receive such notice, request, demand or communication at such party's address set forth on the signature page to this Agreement, provided that any party may change its address for notice by giving to the other party written notice of such change. Any notice given under this Section shall be effective (i) if delivered personally, when delivered, and (ii) if mailed, 48 hours after mailing.

XII. RECORDKEEPING REQUIREMENTS

12.1 Records. Group agrees to maintain during the term of this Agreement and any extensions or renewals hereof and for a period of four (4) years following its termination or expiration, adequate books and records which accurately reflect the services rendered under this Agreement, the charges and billings therefor and the collections received, and any other factors affecting the value or cost of the services provided hereunder to Hospital. These books and records may be inspected by Hospital or its representatives at any reasonable time.

12.2 Allocation Agreement. Group and each Group physician agrees to promptly enter into a written allocation agreement with Hospital (if it is determined by Hospital to be required), after the execution of this Agreement which shall be in compliance with the provisions of 42 C.F.R. §415.60 et seq., so that Hospital may be properly reimbursed for payments to Group hereunder under the Medicare program.

XIII. ACCESS TO BOOK AND RECORDS OF SUBCONTRACTORS

Notwithstanding anything to the contrary in the Agreement, if it shall be determined or asserted that this Agreement is a contract between a provider and a subcontractor within the meaning of Section 1861(v) (1) (I) of the Social Security Act or any rules, regulations, or judicial or administrative interpretation or discussions promulgated or made pursuant thereto, then Group hereby agrees that (i) until the expiration of four (4) years after the furnishing of any service pursuant to this contract, such subcontractor shall make available, upon written request to the Secretary of the Department of Health and Human Services (the "Secretary"), or upon request to the Comptroller General, or any of their duly authorized representatives, this contract, and books, documents and records of such subcontractor that are necessary to certify the nature and extent of the costs incurred by Hospital with respect to this contract and the services provided pursuant hereto, and (ii) if the subcontractor carries out any of the duties of the contract through a subcontract, with a value or cost of \$10,000.00 or more over a twelve-month period, with a related organization, such subcontract shall contain a clause to the effect that until the expiration of four (4) years after the furnishing of such services pursuant to such subcontract, the related

organization shall make available, upon written request to the Secretary, or upon request to the Comptroller General, or any of their duly authorized representatives, the subcontract, and books, documents and records of such organization that are necessary to verify the nature and extent of the costs incurred with respect to such subcontract and the services provided pursuant thereto. As used in this Section, the words "contract" and "this contract" also include any predecessor contracts between the parties hereto. This contract shall be automatically and retroactively amended, without the necessity of any action by the parties hereto, to include the terms of any rules, regulations, or judicial or administrative interpretations or decisions promulgated or made under Section 1861(v) (1) (1) of the Social Security Act, to the extent that the terms of such rules, regulations, interpretations or decisions differ herefrom. Such automatic and retroactive amendment shall be deemed to have become effective on the effective date of this Section. This Section shall be deemed to have become effective on the first date on or after on which this contract unless otherwise provided by rule, regulation, or judicial or Administrative interpretation or decision, in which case the effective date shall be the earliest date allowable pursuant to same. This Section shall have no application if and to the extent that a final administrative or judicial determination is made with specific reference to this contract that this contract is not a contract between a provider and a subcontractor within the meaning of Section 1861(v) (1) (1) of the Social Security Act and any rules, regulations, or judicial or administrative interpretations or decisions promulgated or made pursuant thereto. Nothing in this Section shall be construed to permit the subcontractor to carry out any of the duties of this contract through a subcontract, and such is expressly prohibited.

XIV. COMPENSATION FOR SERVICES

14.1 Group shall be entitled to fees for professional services furnished by its physicians to patients through the Department. Group shall bill their patients or payors under managed care contracts, as the case may be, directly for all such anatomic and clinical services. Group shall not bill patients covered by managed care contracts for amounts in excess of those provided in such contracts. Group shall be solely responsible for the collection of its patient accounts. For histological services provided to Medicare, Medicaid and Tricare inpatient participants, Hospital agrees to pay the amounts outlined in the fee schedule attached as Exhibit A. Group will bill Hospital on a monthly basis for the Medicare, Medicaid, and Tricare inpatient participants. Hospital acknowledges that, as of the date this Agreement was signed, Hospital owes Group a past-due amount of \$212,926.95 for the services furnished by Group to Hospital under this Agreement.

14.2 Neither Group nor any of its physicians shall be compensated by Hospital for any referrals or admissions to or use of Hospital. The parties specifically acknowledge that no provision of this Agreement represents a splitting of fees for physician services. Hospital and Group anticipate that the quality and cost-effective nature of the services provided by Hospital will commend themselves to the patients of Group. However, Hospital and Group clearly understand and acknowledge that the choice of services and the choice of service providers by the patients of Group must be, and will be, made only with regards to the best interest of each patient. Therefore, so there will be no misunderstanding, Hospital specifically assures Group and Group hereby specifically acknowledges that the benefits provided to Group hereunder in no way obligate, and are in no way contingent upon, the admission, recommendation, referral, or

any other form of arrangement by Group for utilization by patients or others of any item or service offered by Hospital or any affiliate of Hospital.

XV. MISCELLANEOUS

15.1 Governing Law. This Agreement has been executed and delivered in, and shall be interpreted, construed, and enforced pursuant to and in accordance with the laws of the State of Texas. Harris County, Texas shall be the proper place of venue for all suits hereon.

15.2 Binding Effect; Assignment. All the terms, provisions, covenants and conditions of this Agreement shall be binding upon and inure to the benefit of and be enforceable by the parties hereto and their respective successors. Except as specifically permitted herein, this Agreement and the rights and obligations of the parties hereto may not be assigned or delegated by either party hereto. Hospital may assign this Agreement to a corporate affiliate or successor or to a successor owner of Hospital Facility. This Agreement may be terminated by Hospital in the event Hospital is sold or closed.

15.3 Waiver of Breach. The waiver by either party of a breach or violation of any provision of this Agreement shall not operate as, or be construed to be, a waiver of any subsequent breach of the same or other provision hereof.

15.4 Severability. In the event any provision of this Agreement is held to be unenforceable for any reason, the unenforceability thereof shall not affect the remainder of this Agreement which shall remain in full force and effect and enforceable in accordance with its terms.

15.5 Articles and Other Headings. The articles and other headings contained in this Agreement are for reference purposes only and shall not affect in any way the meaning or interpretation of this Agreement.

15.6 Amendments and Execution. This Agreement and amendments thereto shall be in writing and executed in multiple copies on behalf of Hospital and Group. Each multiple copy shall be deemed an original, but all multiple copies together shall constitute one and the same instrument.

15.7 Entire Agreement. This Agreement supersedes any previous contracts and constitutes the entire Agreement and understanding of the parties with respect to the services referred to herein. No oral statements or prior written material not specifically incorporated herein shall be of any force and effect and no changes in or additions to this Agreement shall be recognized unless incorporated herein by amendment as provided for herein, with such amendment(s) to become effective on the date stipulated in such amendments. Each party specifically acknowledges that in entering into and executing this Agreement, each party relies solely upon the representations contained in this Agreement and no others.

15.8 Time of the Essence. Time is of the essence of this Agreement.

15.9 Attorneys' Fees. If any action at law or in equity is brought to enforce or interpret the provisions of this Agreement, the prevailing party shall be entitled to reasonable attorneys' fees and expenses in addition to any relief to which it may be entitled.

15.10 Construction. Any references to the masculine, feminine, or neuter genders herein shall be deemed to include the other genders, and singular tense shall be deemed to include the plural tense for purposes of construction and interpretation.

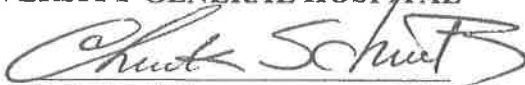
15.11 Authority. Each party hereto and each of the individuals executing this Agreement on behalf of each party hereto jointly and severally represent and warrant to the other party hereto that the individual or individuals executing this Agreement on behalf of such party have full power and authority to bind such party to this Agreement and to the performance called for by this Agreement and that all corporate, partnership, or other action has been taken to fully authorize such party to execute and carry out the terms of this Agreement in accordance with the terms and provisions of the articles of incorporation, partnership agreement, and other applicable organizational documents of such party and with applicable law.

[THIS SPACE INTENTIONALLY LEFT BLANK. SIGNATURE PAGE FOLLOWS]

IN WITNESS WHEREOF, the parties have executed this Agreement in multiple originals by their duly authorized agents effective as of the date above first written.

UNIVERSITY GENERAL HOSPITAL

By:



~~Kelly Reidel~~ **CHUCK SCHUETTE**

Chief Executive Officer

Date:

Address: Chief Executive Officer
University General Hospital
7501 Fannin, Suite 100
Houston, Texas 77030

COMMUNITY PATHOLOGY, P.L.L.C.




David M. Titus, MBA
President and CEO

Date:

9/20/11

Address: Senior Director, Operations, Department of Pathology
Baylor College of Medicine
Department of Pathology
One Baylor Plaza, Suite 286A
Houston, Texas 77030

APPROVED AS TO FORM
Office of the General Counsel
Baylor College of Medicine
By:  9/14/11

With a copy to: Baylor College of Medicine
Office of General Counsel
One Baylor Plaza, Suite 415A
Houston, Texas 77030

g pathology university general hospital histology agmt 30 aug 2011 (2006 - 2011 contract).nif

EXHIBIT A
Fee Schedule

CPT	DESCRIPTION	Type of Service	Group Fee by CPT Code
85060	PERIPHERAL BLOOD SMEAR	TC	-
85097	BONE MARROW, SMEAR INTERP	TC	50.91
88104	CYTOLOGY, WASHING/BRUSHING	TC	32.26
88108	CYTOPATHOLOGY, CONCENTRATION	TC	44.46
88161	CYTOPATH, SMEAR, ANY OTHER	TC	32.26
88172	EVAL OF FNA ADEQUACY	TC	22.97
88173	FNA, INTERP & REPORT	TC	73.00
88300	SURGICAL PATH, GROSS ONLY	TC	20.06
88302	SURG PATH, LEVEL II	TC	46.13
88304	SURG PATH, LEVEL III	TC	58.18
88305	SURGICAL PATH, LEVEL IV	TC	75.60
88307	SURGICAL PATH, LEVEL V	TC	118.03
88309	SURGICAL PATH, LEVEL VI	TC	162.04
88311	DECALCIFICATION	TC	6.62
88312	SPECIAL STAINS, GROUP I	TC	60.35
88313	SPECIAL STAINS, GROUP II	TC	53.87
88329	INTRAOPERATIVE CONSULT, W/O	TC	29.74
88331	FROZEN SECTION	TC	29.74
88332	FROZEN SECTION ADD'L SPECIMEN	TC	10.93
88333	TOUCH PREP	TC	30.59
88342	IMMUNOCYTOCHEMISTRY, EACH	TC	52.16

AMENDMENT TO THE HISTOLOGY PROCESSING AND TRANSCRIPTION AGREEMENT

This Amendment to the Histology Processing and Transcription Agreement (this "*Amendment*" or collectively the "*Agreement*") is entered into by and between Community Pathology, P.L.L.C., a Texas professional limited liability company ("*CPA*"), and University General Hospital, L.P., a Texas limited partnership ("*Hospital*"). CPA and Hospital are sometimes referred to in this Amendment individually as "party", and collectively as "parties."

A. CPA and Hospital previously entered into that certain Histology Processing and Transcription Agreement effective as of September 1, 2006 (the "*Agreement*"), under which CPA agreed to provide histology processing and transcription services to Hospital;

B. The Parties have agreed to amend the Term set forth in Section 10.1 of the Agreement;

C. The Parties have agreed to amend the Termination Without Cause set forth in Section 10.3.3 of the Agreement; and

D. The Parties have agreed to amend Exhibit A – Fee Schedule for such CPT codes as outlined herein.

NOW THEREFORE, in consideration of the mutual covenants and conditions contained in this Amendment, and intending to be legally bound, CPA and Hospital agree as follows:

Section 10.1 – Initial Term: This Agreement shall be effective as of the Effective Date even though it may be finally executed and delivered on a subsequent date, and its initial Term ("Term") shall be extended for three (3) years after the Effective Date of this Amendment. Unless sooner terminated as provided herein, the Term shall expire and this Agreement shall be of no further force and effect as of the end of the business day on January 31, 2017.

Section 10.3.3 – Termination Without Cause: Neither party may terminate this Agreement without cause during the first twelve (12) months after the Effective Date of this Amendment. After expiration of the first twelve (12) months, either party may terminate this Agreement without cause by providing not less than one hundred eighty (180) days prior written notice of termination stating the intended date of termination.

Section 14.1 – Compensation for Services: Exhibit A – Fee Schedule is amended as outlined herein for such CPT codes as applicable.

1. In the event of a conflict between the provisions of the Agreement and this Amendment, the provisions of this Amendment shall govern. Other than as amended by this Amendment, all terms and provisions of the Agreement will remain in full force and effect.
2. All capitalized terms not defined in this Amendment shall have the meaning ascribed to them in the Agreement.
3. The effective date of this Amendment is February 1, 2014 (the "*Amendment Date*" and "*Effective Date*").

IN WITNESS WHEREOF, the parties have executed this Amendment on the date(s) set forth below, but to be effective as of the Amendment Date for all purposes.

COMMUNITY PATHOLOGY, P.L.L.C.

UNIVERSITY GENERAL HOSPITAL

By: David M. Titus
David M. Titus, MBA
President and CEO

2-19-2014
Date

By: [Signature]
David Kreye
Chief Executive Officer

2/16/14
Date

APPROVED AS TO FORM
Office of the General Counsel
Baylor College of Medicine
By: [Signature] 2/19/14

Exhibit A –Fee Schedule		
University General Hospital System		
CPT Code	Description	Technical Bill Back Price
88300	Surgical Path Gross Only	\$ 10.20
88302	Tissue Exam by Pathologist	\$ 24.18
88304	Tissue Exam by Pathologist	\$ 33.38
88305	Tissue Exam by Pathologist	\$ 33.38
88307	Tissue Exam by Pathologist	\$ 70.00
88309	Tissue Exam by Pathologist	\$ 115.00
88311	Decal Tissue	\$ 8.15
88312	Special Stains Gp I	\$ 71.22
88313	Special Stains Gp II	\$ 55.88
88342	Immuno Hisctochemical Stains	\$ 73.27
Bill back pricing for Medicare, Medicaid, and Government funded patients		

ADDENDUM TO THE HISTOLOGY PROCESSING AND TRANSCRIPTION AGREEMENT

This Addendum to the Histology Processing and Transcription Agreement (this "*Addendum*" or collectively the "*Agreement*") is entered into by and between Community Pathology, P.L.L.C., a Texas professional limited liability company ("*CPA*"), and University General Hospital, L.P., a Texas limited partnership ("*Hospital*"). CPA and Hospital are sometimes referred to in this Addendum individually as "Party", and collectively as "Parties."

A. CPA and Hospital previously entered into to that certain Histology Processing and Transcription Agreement effective as of September 1, 2006 (the "*Agreement*"), under which CPA agreed to provide histology processing and transcription services to Hospital; and

B. The Parties have agreed to a prompt-pay discount on the past-due balance set forth in Section 14.1 of the Agreement, which is \$440,700.40 (the "*Balance*").

1. CPA agrees to discount the past-due amount owed to CPA by Hospital as specified in Section 14.1 of the Agreement as follows:
 - (a) If Hospital pays the entire Balance to CPA by April 30, 2014 (i.e. within ninety (90) days after the Effective Date), then CPA agrees to discount the Balance by twenty five percent (25%). The hospital may wire transfer funds weekly to CPA for twelve (12) weeks, commencing with the week of February 3, 2014 until the discounted balance is paid full;
 - (b) if Hospital fails to pay the entire Balance by April 30, 2014, then no discount shall apply. The Balance will continue to accrue interest at six percent (6%) per annum, including any Balance accrued prior to Effective Date, until Hospital pays the entire Balance to CPA.
 - (c) Hospital shall remain current on all invoices going forward (net 30 days), commencing with the January, 2014 invoice
2. In the event of a conflict between the provisions of the Agreement and this Addendum, the provisions of this Addendum shall govern. Other than as amended by this Addendum, all terms and provisions of the Agreement will remain in full force and effect.
3. This Addendum replaces and supersedes the prior Addendum executed between the Parties with an effective date of September 1, 2011.
4. All capitalized terms not defined in this Addendum shall have the meaning ascribed to them in the Agreement.
5. The effective date of this Addendum is January 31, 2014 (the "*Addendum Date*" and "*Effective Date*").

IN WITNESS WHEREOF, the parties have executed this Addendum on the date(s) set forth below, but to be effective as of the Addendum Date for all purposes.

COMMUNITY PATHOLOGY, P.L.L.C.

UNIVERSITY GENERAL HOSPITAL

By: David M. Titus
David M. Titus, MBA
President and CEO
2-19-2014
Date

By: [Signature]
David Kreye
Chief Executive Officer
2/11/14
Date

APPROVED AS TO FORM
Office of the General Counsel
Baylor College of Medicine
By: [Signature] 2/15/14

EXECUTION COPY

ADDENDUM TO HISTOLOGY PROCESSING AND TRANSCRIPTION AGREEMENT

This Addendum to Histology Processing and Transcription Agreement (this "**Addendum**") is entered into by and between Community Pathology, P.L.L.C., a Texas professional limited liability company ("**CPA**"), and University General Hospital, L.P., a Texas limited partnership ("**Hospital**"). CPA and Hospital are sometimes referred to in this Addendum individually as "party", and collectively as "parties."

A. CPA and Hospital previously entered into to that certain Histology Processing and Transcription Agreement effective as of September 1, 2006 (the "**Agreement**"), under which CPA agreed to provide histology processing and transcription services to Hospital; and

B. The Parties have agreed to a prompt-pay discount on the past-due balance set forth in Section 14.1 of the Agreement, which is \$212,926.95 (the "**Balance**").

NOW THEREFORE, in consideration of the mutual covenants and conditions contained in this Addendum, and intending to be legally bound, CPA and Hospital agree as follows:

1. CPA agrees to discount the past-due amount owed to CPA by Hospital as specified in Section 14.1 of the Agreement as follows:

(a) if Hospital pays the entire Balance by July 31, 2012, then CPA agrees to discount the Balance by a thirty percent (30%) – i.e., the amount due would be \$149,048.86 if paid by July 31, 2012,

(b) if Hospital pays the entire Balance by December 31, 2011, then CPA agrees to discount the Balance by forty percent (40%) – i.e., the amount due would be \$127,756.17 if paid by December 31, 2011; or

(c) if Hospital fails to pay the entire Balance by July 31, 2012, then no discount shall apply, and the Balance will accrue interest at six percent (6%) per annum beginning on August 1, 2011, until Hospital pays the Balance in full to CPA.

2. In the event of a conflict between the provisions of the Agreement and this Addendum, the provisions of this Addendum shall govern. Other than as amended by this Addendum, all terms and provisions of the Agreement will remain in full force and effect.

3. All capitalized terms not defined in this Addendum shall have the meaning ascribed to them in the Agreement.

4. The effective date of this Addendum is September 1, 2011 (the "**Addendum Date**").

(Signature Page Follows)

IN WITNESS WHEREOF, the parties have executed this Addendum on the date(s) set forth below, but to be effective as of the Addendum Date for all purposes.

COMMUNITY PATHOLOGY, P.L.L.C.:

By: David M. Titus
David M. Titus, MBA
President and CEO
Date: 10/3/11

UNIVERSITY GENERAL HOSPITAL

By: Chuck Schaefer
Kelly Reidel ~~CHUCK SCHAEFER~~
Chief Executive Officer
Date: 10/3/11

s:\pathology-addendum to 2006 - 2011 histology agreement (ugh) final 03oct2011.docx

APPROVED AS TO FORM
Office of the General Counsel
Baylor College of Medicine
By: MP 10/3/11

Summary of Histology Administrative Expense Claim Payable to
Community Pathology P.L.L.C.

Month	Amount Due	Claim Amount
Statement dated 6/30/15 for March 2015 amounts	\$8,266.65	\$8,266.65
Statement dated 6/30/15 for April 2015 amounts	\$8,388.15	\$8,388.15
Statement dated 6/30/15 for April & May 2015 amounts	\$10,310.39	\$10,310.39
Statement dated 7/31/15 for June 2015	\$8,923.73	(– 454.71) = \$8,469.02 (subtraction for pre- petition amounts)
Statement dated 8/31/15 for July 2015	\$8,395.50	\$8,395.50
Statement dated 9/30/15 for August 2015	\$8,937.04	\$8,937.04
September 2015	\$7,745.78	\$7,745.78
Balance Due	\$69,436.26	\$68,981.55 balance due

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0315

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
03/02/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/02/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/02/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/02/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/02/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/02/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/03/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
03/02/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/02/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/02/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/02/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/02/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/02/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/03/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
03/03/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
03/04/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
03/04/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
03/04/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
03/04/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/04/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/04/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/06/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/06/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/06/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0315

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0315

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
03/06/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/06/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/06/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
03/04/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
03/04/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
03/04/15		SEE BELOW	FROZEN SECTION, 1ST SPEC	0883312	39.19	
03/04/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/06/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/06/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/06/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/06/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/06/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/06/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/09/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/09/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/09/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/09/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
03/10/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/10/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
03/10/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/10/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/10/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/10/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/10/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0315

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0315

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
03/10/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/09/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/09/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/11/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/11/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/04/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
03/04/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
03/04/15		SEE BELOW	FROZEN SECTION, 1ST SPEC	0883312	110.00	
03/04/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/11/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	45.37	
03/11/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/06/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	8834213	40.00	
03/06/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	8834213	40.00	
03/04/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/04/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/06/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/06/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/03/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
03/09/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
03/13/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/13/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
03/13/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/13/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	

CONTRACT:
U0315

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0315

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATIN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
03/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/12/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
03/12/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	8834213	40.00	
03/12/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/17/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/17/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/17/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/17/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/17/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/17/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
03/13/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
03/18/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/18/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/18/15		SEE BELOW	FROZEN SECTION, 1ST SPEC	0883312	39.19	
03/18/15		SEE BELOW	PATH CONSULT DUR SURG TO	0883332	44.58	
03/18/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/18/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/18/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/18/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/18/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/18/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/18/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/18/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/17/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	

CONTRACT:
U0315

AMOUNT DUE
* CONTINUED *

BAYLOR ~~PATHOLOGY~~ CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0315

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATIN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
03/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/20/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/20/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/10/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/23/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/23/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/23/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/23/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/23/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/23/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/24/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/24/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/24/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
03/24/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/24/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/24/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/24/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/24/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0315

AMOUNT DUE
* CONTINUED *

BAYLOR ~~PATHOLOGY~~ CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0315

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
03/24/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/23/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/23/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/16/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/16/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/25/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/25/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/25/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
03/25/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/25/15		SEE BELOW	SURG PATH, LEVEL II	0883022	24.18	
03/26/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/26/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/25/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
03/25/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/25/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/25/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/25/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/25/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/25/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/27/15		SEE BELOW	CYTOPATH, CONCENTRATION	0881082	61.49	
03/30/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	

CONTRACT:
U0315

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0315

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
03/30/15		SEE BELOW	CYTOPATH, WASHINGS/BRUSH	0881042	45.66	
03/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/31/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/31/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/30/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/30/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/31/15		SEE BELOW	SURG PATH, LEVEL II	0883022	24.18	
03/30/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/30/15		SEE BELOW	CYTOPATH, WASHINGS/BRUSH	0881042	45.66	
03/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/28/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/28/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/28/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/28/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
03/30/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
03/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0315

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0315

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
03/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
03/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
			Claim total:	8266.65		

CONTRACT:	CURRENT	OVER 30	OVER 60	OVER 90	OVER 120	AMOUNT DUE
U0315	.00	.00	.00	4177.86	4088.79	8266.65

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0415

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/01/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/01/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/01/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/02/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/02/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/02/15		SEE BELOW	CYTOPATH, WASHINGS/BRUSH	0881042	45.66	
04/02/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/02/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/02/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/02/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/02/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/04/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/04/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/03/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/03/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/03/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/03/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/06/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/06/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/01/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/01/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/02/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/02/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/03/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	

CONTRACT:
U0415

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0415

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/03/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/06/15		SEE BELOW	FNA, INTERP/REPORT	0881732	79.82	
04/06/15		SEE BELOW	FNA ADEQUACY EVALUATION	0881722	19.76	
04/07/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/07/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/07/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/07/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/07/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/07/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/07/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/07/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/07/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/07/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/07/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/07/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
04/02/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
04/02/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
04/02/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/02/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
04/08/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/08/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/09/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/09/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/03/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, FA	0883422	40.00	

CONTRACT:
U0415

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0415

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATIN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/03/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/03/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/07/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/07/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/03/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
04/09/15		SEE BELOW	FNA, INTERP/REPORT	0881732	79.82	
04/09/15		SEE BELOW	FNA ADEQUACY EVALUATION	0881722	19.76	
04/10/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/10/15		SEE BELOW	FNA, INTERP/REPORT	0881732	79.82	
04/10/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/10/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/10/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/10/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/10/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/13/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/13/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/13/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/14/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/13/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/13/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/13/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	

CONTRACT:
U0415

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0415

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATIN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/13/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/13/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/13/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/15/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/15/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/15/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/15/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/14/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
04/16/15		SEE BELOW	SURG PATH, LEVEL II	0883022	24.18	
04/17/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/17/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/20/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/20/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/20/15		SEE BELOW	SPECIAL STAINS, GROUP II	0883132	55.88	
04/21/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/21/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/21/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/21/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/20/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/20/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0415

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0415

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/21/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/21/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/21/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/21/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/22/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/22/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/23/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/23/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/23/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/23/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/23/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/23/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/15/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
04/15/15		SEE BELOW	FROZEN SECTION, 1ST SPEC	0883312	39.19	
04/15/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/15/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
04/15/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/15/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/23/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/23/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/22/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	0883422	73.27	
04/22/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/22/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/22/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	

CONTRACT:
U0415

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0415

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/22/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
04/23/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
04/23/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
04/24/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/24/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/28/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/24/15		SEE BELOW	FNA, INTERP/REPORT	0881732	79.82	
04/24/15		SEE BELOW	FNA ADEQUACY EVALUATION	0881722	19.76	
04/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/27/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
04/28/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/28/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/28/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/28/15		SEE BELOW	SURG PATH, GROSS ONLY	0883002	10.20	
04/28/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
04/27/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	8834213	40.00	
04/27/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/29/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/29/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0415

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0415

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/27/15		SEE BELOW	FNA, INTERP/REPORT	0881732	79.82	
04/30/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/30/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/30/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/24/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	8834213	40.00	
04/24/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	0883412	40.00	
04/24/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	0883412	40.00	
04/24/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/24/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/24/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/30/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/30/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/29/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
04/29/15		SEE BELOW	SURG PATH, LEVEL II	0883022	24.18	
04/28/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/28/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
04/29/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/29/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/29/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/29/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/29/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0415

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0415

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/29/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/29/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/29/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/28/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	0883422	40.00	
04/28/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/30/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	0883422	40.00	
Claim total:				8388.15		

CONTRACT:	CURRENT	OVER 30	OVER 60	OVER 90	OVER 120	AMOUNT DUE
U0415	.00	.00	4378.76	4009.39	.00	8388.15

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0515

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
05/01/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/01/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
05/01/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/01/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/01/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/01/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/01/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/04/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/04/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/04/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/04/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/04/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
05/05/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/05/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/05/15		SEE BELOW	CYTOPATH, WASHINGS/BRUSH	0881042	45.66	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/04/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/04/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/05/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/05/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0515

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0515

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
05/05/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/05/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/05/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/05/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/05/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/05/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/02/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/04/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
05/04/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
05/05/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
05/05/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
05/07/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/07/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/07/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/07/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/07/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/07/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/06/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
05/08/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
05/08/15		SEE BELOW	DECALCIFICATION	0883112	8.15	

CONTRACT:
U0515

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0515

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
05/11/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/11/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/08/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/08/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/11/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/11/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/07/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/07/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
05/11/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/11/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/11/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/15/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/15/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/14/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/14/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/12/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	0883422	40.00	
05/12/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/12/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/12/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/12/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/12/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
05/26/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	45.37	
05/26/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/12/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	

CONTRACT:
U0515

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0515

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
05/12/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
05/15/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
05/15/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
05/15/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/15/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/19/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/19/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/19/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/19/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/20/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/20/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/19/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/19/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/19/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/19/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/21/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/21/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/20/15		SEE BELOW	SURG PATH, LEVEL II	0883022	24.18	
05/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/21/15		SEE BELOW	SURG PATH, GROSS ONLY	0883002	10.20	
05/22/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/22/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0515

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0515

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATIN HARMONEE VICE, CEO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
05/22/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/27/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/27/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/27/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/27/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/27/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
05/22/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/22/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/22/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/22/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/22/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/22/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/22/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/22/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0515

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0515

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
05/20/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
05/20/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
05/20/15		SEE BELOW	SURG PATH, LEVEL II	0883022	24.18	
05/08/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
05/08/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
05/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/29/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/29/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/29/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/29/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/22/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
05/22/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
05/22/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	
05/22/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
05/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/27/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/28/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/28/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/28/15		SEE BELOW	SURG PATH, LEVEL III	0883042	33.38	

CONTRACT:
U0515

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0515

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
05/29/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/29/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/09/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	8834213	40.00	
04/09/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	0883412	40.00	
04/09/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	0883412	40.00	
04/09/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/09/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/09/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/09/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/27/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	8834213	40.00	
04/27/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/27/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/27/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/27/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/27/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/06/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	8834213	40.00	
05/06/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/06/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/06/15		SEE BELOW	SPECIAL STAINS, GROUP II	0883132	55.88	
04/24/15		SEE BELOW	IMMUNOHISTOCHEMISTRY, EA	8834213	40.00	
04/24/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/24/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0515

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0515

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATIN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/06/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
04/06/15		SEE BELOW	SURG PATH, LEVEL II	0883022	24.18	
04/10/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/10/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/10/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/10/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/10/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/10/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/08/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/08/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/05/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/05/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/13/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/13/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/13/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/13/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/15/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/15/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/15/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/15/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	

CONTRACT:
U0515

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0515

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/15/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/15/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/17/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/17/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/28/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/28/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/16/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
04/16/15		SEE BELOW	DECALCIFICATION	0883112	8.15	
05/15/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/15/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
04/29/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
04/29/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/01/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/01/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/01/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/13/15		SEE BELOW	SURG PATH, LEVEL V	0883072	70.00	
05/13/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/13/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/05/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/05/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/07/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/07/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
05/20/15		SEE BELOW	SURG PATH, LEVEL IV	0883052	33.38	
05/20/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0515

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0515

STATEMENT DATE: 6/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
05/18/15		SEE BELOW	CYTOPATH, THIN PREP METH	0881122	36.31	
05/18/15		SEE BELOW	SPECIAL STAINS, GROUP I	0883122	71.22	
			Claim total:	10310.39		

CONTRACT:	CURRENT	OVER 30	OVER 60	OVER 90	OVER 120	AMOUNT DUE
U0515	.00	7533.65	2776.74	.00	.00	10310.39

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0615

STATEMENT DATE: 7/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
01/07/15			CYTOPATH, THIN PREP METH	0881122	36.31	
01/07/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/01/15			SURG PATH, LEVEL IV	0883052	33.38	
06/01/15			SURG PATH, LEVEL IV	0883052	33.38	
06/01/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/01/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/01/15			SURG PATH, LEVEL IV	0883052	33.38	
06/01/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/01/15			SURG PATH, GROSS ONLY	0883002	10.20	
06/02/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/02/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/01/15			SURG PATH, LEVEL IV	0883052	33.38	
06/01/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/01/15			SURG PATH, LEVEL IV	0883052	33.38	
06/01/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/05/15			SURG PATH, LEVEL IV	0883052	33.38	
06/05/15			SURG PATH, LEVEL IV	0883052	33.38	
06/05/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/05/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/05/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/04/15			SURG PATH, LEVEL IV	0883052	33.38	
06/04/15			SURG PATH, LEVEL IV	0883052	33.38	
06/04/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/04/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0615

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0615

STATEMENT DATE: 7/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
06/05/15			SURG PATH, LEVEL IV	0883052	33.38	
06/05/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/05/15			SURG PATH, LEVEL IV	0883052	33.38	
06/05/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/05/15			SURG PATH, LEVEL IV	0883052	33.38	
06/05/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/01/15			SURG PATH, LEVEL V	0883072	70.00	
06/01/15			SURG PATH, LEVEL V	0883072	70.00	
06/01/15			FROZEN SECTION, 1ST SPEC	0883312	39.19	
06/05/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/05/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/05/15			SURG PATH, LEVEL IV	0883052	33.38	
06/05/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/03/15			SURG PATH, LEVEL IV	0883052	33.38	
06/03/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/05/15			SURG PATH, LEVEL IV	0883052	33.38	
06/01/15			SURG PATH, LEVEL IV	0883052	33.38	
06/04/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/04/15			SURG PATH, LEVEL IV	0883052	33.38	
06/04/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/03/15			IMMUNOHISTOCHEMISTRY, EA	0883422	73.27	
06/03/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/03/15			SURG PATH, LEVEL IV	0883052	33.38	
06/03/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0615

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0615

STATEMENT DATE: 7/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
06/08/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/08/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/08/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/08/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/09/15			SURG PATH, LEVEL IV	0883052	33.38	
06/09/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/09/15			SURG PATH, LEVEL IV	0883052	33.38	
06/09/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/08/15			FNA, INTERP/REPORT	0881732	79.82	
06/08/15			SURG PATH, LEVEL IV	0883052	33.38	
06/08/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/08/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/08/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/08/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/09/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/09/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/09/15			SURG PATH, LEVEL IV	0883052	33.38	
06/09/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/09/15			SURG PATH, LEVEL IV	0883052	33.38	
06/09/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/08/15			SURG PATH, LEVEL IV	0883052	33.38	
06/08/15			SURG PATH, LEVEL V	0883072	70.00	
06/09/15			CYTOPATH, CONCENTRATION	0881082	61.49	
06/10/15			SURG PATH, LEVEL V	0883072	70.00	

CONTRACT:
U0615

AMOUNT DUE
* CONTINUED *

BAYLOR ~~PATHOLOGY~~ CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0615

STATEMENT DATE: 7/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
06/10/15			SURG PATH, LEVEL II	0883022	24.18	
06/10/15			SPECIAL STAINS, GROUP II	0883132	55.88	
06/10/15			SPECIAL STAINS, GROUP II	0883132	55.88	
06/10/15			SPECIAL STAINS, GROUP II	0883132	55.88	
06/10/15			SPECIAL STAINS, GROUP II	0883132	55.88	
06/12/15			SURG PATH, LEVEL IV	0883052	33.38	
06/12/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/10/15			SURG PATH, LEVEL IV	0883052	33.38	
06/10/15			SURG PATH, LEVEL IV	0883052	33.38	
06/10/15			SURG PATH, LEVEL IV	0883052	33.38	
06/10/15			FNA, INTERP/REPORT	0881732	79.82	
06/11/15			SURG PATH, LEVEL IV	0883052	33.38	
06/12/15			SURG PATH, LEVEL IV	0883052	33.38	
06/01/15			IMMUNOHISTOCHEMISTRY, EA	0883422	73.27	
06/04/15			IMMUNOHISTOCHEMISTRY, EA	0883422	73.27	
06/28/15			CYTOPATH, THIN PREP METH	0881122	45.37	
06/28/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/03/15			SURG PATH, LEVEL V	0883072	70.00	
06/03/15			SURG PATH, GROSS ONLY	0883002	10.20	
06/11/15			SURG PATH, LEVEL IV	0883052	33.38	
06/15/15			SURG PATH, LEVEL IV	0883052	33.38	
06/15/15			SURG PATH, LEVEL IV	0883052	33.38	
06/15/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/17/15			SURG PATH, LEVEL IV	0883052	33.38	

CONTRACT:
U0615

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0615

STATEMENT DATE: 7/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
06/17/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/18/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/18/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/18/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/18/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/19/15			SURG PATH, LEVEL V	0883072	70.00	
06/19/15			SURG PATH, LEVEL III	0883042	33.38	
06/19/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/19/15			SURG PATH, LEVEL IV	0883052	33.38	
06/19/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/23/15			SURG PATH, LEVEL IV	0883052	33.38	
06/23/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/17/15			SURG PATH, LEVEL IV	0883052	33.38	
06/17/15			SURG PATH, LEVEL IV	0883052	33.38	
06/17/15			DECALCIFICATION	0883112	8.15	
06/17/15			DECALCIFICATION	0883112	8.15	
06/19/15			SURG PATH, LEVEL IV	0883052	33.38	
06/19/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/19/15			SURG PATH, LEVEL IV	0883052	33.38	
06/19/15			SURG PATH, LEVEL IV	0883052	33.38	
06/19/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/23/15			SURG PATH, LEVEL IV	0883052	33.38	
06/23/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/22/15			CYTOPATH, THIN PREP METH	0881122	36.31	

CONTRACT:
U0615

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0615

STATEMENT DATE: 7/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
06/22/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/19/15			SURG PATH, LEVEL IV	0883052	33.38	
06/19/15			SURG PATH, LEVEL IV	0883052	33.38	
06/23/15			CYTOPATH, THIN PREP METH	0881122	36.31	
06/25/15			SURG PATH, LEVEL IV	0883052	33.38	
06/25/15			SURG PATH, LEVEL IV	0883052	33.38	
06/25/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/25/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/24/15			SURG PATH, LEVEL III	0883042	33.38	
04/08/15			SURG PATH, LEVEL IV	0883052	33.38	
04/08/15			SPECIAL STAINS, GROUP I	0883122	71.22	
04/07/15			SURG PATH, LEVEL IV	0883052	33.38	
04/07/15			SURG PATH, LEVEL IV	0883052	33.38	
04/07/15			SURG PATH, LEVEL IV	0883052	33.38	
04/07/15			SURG PATH, LEVEL IV	0883052	33.38	
04/07/15			SURG PATH, LEVEL IV	0883052	33.38	
04/07/15			SURG PATH, LEVEL IV	0883052	33.38	
04/07/15			SPECIAL STAINS, GROUP I	0883122	71.22	
04/07/15			SPECIAL STAINS, GROUP I	0883122	71.22	
04/07/15			SPECIAL STAINS, GROUP I	0883122	71.22	
05/29/15			SURG PATH, LEVEL IV	0883052	33.38	
05/29/15			SPECIAL STAINS, GROUP I	0883122	71.22	
04/08/15			SURG PATH, LEVEL IV	0883052	33.38	
04/08/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0615

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0615

STATEMENT DATE: 7/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
04/08/15			CYTOPATH, THIN PREP METH	0881122	36.31	
04/08/15			SPECIAL STAINS, GROUP I	0883122	71.22	
04/09/15			CYTOPATH, THIN PREP METH	0881122	36.31	
04/09/15			SPECIAL STAINS, GROUP I	0883122	71.22	
04/09/15			CYTOPATH, THIN PREP METH	0881122	36.31	
04/09/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/26/15			SURG PATH, LEVEL IV	0883052	33.38	
06/26/15			SURG PATH, LEVEL III	0883042	33.38	
06/26/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/29/15			SURG PATH, LEVEL IV	0883052	33.38	
06/29/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/29/15			SURG PATH, LEVEL IV	0883052	33.38	
06/29/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/25/15			SURG PATH, LEVEL V	0883072	70.00	
06/26/15			SURG PATH, LEVEL III	0883042	33.38	
06/27/15			SURG PATH, LEVEL III	0883042	33.38	
06/27/15			SPECIAL STAINS, GROUP II	0883132	55.88	
06/27/15			DECALCIFICATION	0883112	8.15	
06/29/15			SURG PATH, LEVEL III	0883042	33.38	
06/30/15			CYTOPATH, CONCENTRATION	0881082	61.49	
06/29/15			SURG PATH, LEVEL III	0883042	33.38	
06/30/15			SURG PATH, LEVEL IV	0883052	33.38	
02/02/15			SURG PATH, LEVEL IV	0883052	33.38	
02/02/15			SURG PATH, LEVEL IV	0883052	33.38	

CONTRACT:
U0615

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0615

STATEMENT DATE: 7/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
02/02/15			SURG PATH, LEVEL IV	0883052	33.38	
02/02/15			SURG PATH, LEVEL IV	0883052	33.38	
02/02/15			SPECIAL STAINS, GROUP I	0883122	71.22	
02/02/15			SPECIAL STAINS, GROUP I	0883122	71.22	
02/02/15			SPECIAL STAINS, GROUP I	0883122	71.22	
06/29/15			SURG PATH, LEVEL IV	0883052	33.38	
06/29/15			SURG PATH, LEVEL IV	0883052	33.38	
06/29/15			SURG PATH, LEVEL IV	0883052	33.38	
06/29/15			DECALCIFICATION	0883112	8.15	
06/29/15			DECALCIFICATION	0883112	8.15	
06/29/15			DECALCIFICATION	0883112	8.15	
06/04/15			IMMUNOHISTOCHEMISTRY, EA	0883422	40.00	
06/24/15			IMMUNOHISTOCHEMISTRY, EA	0883422	73.27	
06/24/15			SURG PATH, LEVEL IV	0883052	33.38	
06/24/15			SPECIAL STAINS, GROUP I	0883122	71.22	
Claim total:				8923.73		

CONTRACT:	CURRENT	OVER 30	OVER 60	OVER 90	OVER 120	AMOUNT DUE
U0615	4404.60	4519.13	.00	.00	.00	8923.73

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0715

STATEMENT DATE: 8/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
07/06/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/06/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/06/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/06/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/03/15			SURG PATH, LEVEL II	0883022	24.18	
07/06/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/06/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/06/15			SURG PATH, LEVEL IV	0883052	33.38	
07/06/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/03/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/03/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/07/15			SURG PATH, LEVEL IV	0883052	33.38	
07/07/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/07/15			SURG PATH, LEVEL IV	0883052	33.38	
07/03/15			SURG PATH, LEVEL IV	0883052	33.38	
07/03/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/02/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/02/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/02/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/02/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/06/15			SURG PATH, LEVEL IV	0883052	33.38	
07/06/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/08/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/08/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0715

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0715

STATEMENT DATE: 8/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
07/07/15			SURG PATH, LEVEL III	0883042	33.38	
07/08/15			SURG PATH, LEVEL IV	0883052	33.38	
07/08/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/09/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/09/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/09/15			SURG PATH, LEVEL IV	0883052	33.38	
07/06/15			SURG PATH, LEVEL IV	0883052	33.38	
07/06/15			DECALCIFICATION	0883112	8.15	
07/08/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/08/15			CYTOPATH, WASHINGS/BRUSH	0881042	29.46	
07/09/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/09/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/15/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/15/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/15/15			CYTOPATH, WASHINGS/BRUSH	0881042	29.46	
07/15/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/15/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/15/15			SURG PATH, LEVEL III	0883042	33.38	
07/15/15			SURG PATH, LEVEL IV	0883052	33.38	
07/15/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/13/15			SURG PATH, LEVEL IV	0883052	33.38	
07/14/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/14/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/16/15			SURG PATH, LEVEL IV	0883052	33.38	

CONTRACT:
U0715

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0715

STATEMENT DATE: 8/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
07/16/15			SURG PATH, LEVEL IV	0883052	33.38	
07/16/15			SURG PATH, LEVEL IV	0883052	33.38	
07/16/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/16/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/14/15			SURG PATH, LEVEL III	0883042	33.38	
07/16/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/16/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/16/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/16/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/15/15			IMMUNOHISTOCHEMISTRY, EA	0883422	40.00	
07/15/15			SURG PATH, LEVEL IV	0883052	33.38	
07/15/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/10/15			SURG PATH, LEVEL IV	0883052	33.38	
07/10/15			SURG PATH, LEVEL IV	0883052	33.38	
07/10/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/01/15			SURG PATH, LEVEL V	0883072	70.00	
07/01/15			SURG PATH, LEVEL IV	0883052	33.38	
07/01/15			DECALCIFICATION	0883112	8.15	
07/01/15			SURG PATH, LEVEL IV	0883052	33.38	
07/01/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/01/15			SURG PATH, LEVEL IV	0883052	33.38	
07/01/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/01/15			SURG PATH, GROSS ONLY	0883002	10.20	
07/03/15			SURG PATH, LEVEL IV	0883052	33.38	

CONTRACT:
U0715

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0715

STATEMENT DATE: 8/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
07/03/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/03/15			SURG PATH, LEVEL IV	0883052	33.38	
07/03/15			SURG PATH, LEVEL IV	0883052	33.38	
07/03/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/03/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/01/15			SURG PATH, LEVEL III	0883042	33.38	
07/01/15			SURG PATH, GROSS ONLY	0883002	10.20	
07/03/15			SURG PATH, LEVEL IV	0883052	33.38	
07/03/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/03/15			SURG PATH, LEVEL IV	0883052	33.38	
07/03/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/09/15			SURG PATH, LEVEL IV	0883052	33.38	
07/09/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/10/15			SURG PATH, LEVEL IV	0883052	33.38	
07/10/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/10/15			SURG PATH, LEVEL IV	0883052	33.38	
07/10/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/13/15			SURG PATH, LEVEL IV	0883052	33.38	
07/13/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/05/15			SURG PATH, LEVEL V	0883072	70.00	
07/05/15			SPECIAL STAINS, GROUP II	0883132	55.88	
07/05/15			SPECIAL STAINS, GROUP II	0883132	55.88	
07/05/15			SPECIAL STAINS, GROUP II	0883132	55.88	
07/05/15			SPECIAL STAINS, GROUP II	0883132	55.88	

CONTRACT:
U0715

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0715

STATEMENT DATE: 8/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
07/10/15			SURG PATH, LEVEL IV	0883052	33.38	
07/10/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/12/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/12/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/10/15			SURG PATH, LEVEL IV	0883052	33.38	
07/10/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/12/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/12/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/10/15			SURG PATH, LEVEL III	0883042	33.38	
07/22/15			SURG PATH, LEVEL IV	0883052	33.38	
07/22/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/29/15			SURG PATH, LEVEL IV	0883052	33.38	
07/29/15			DECALCIFICATION	0883112	8.15	
07/14/15			SURG PATH, LEVEL IV	0883052	33.38	
07/14/15			DECALCIFICATION	0883112	8.15	
07/24/15			SURG PATH, LEVEL IV	0883052	33.38	
07/24/15			SURG PATH, LEVEL IV	0883052	33.38	
07/24/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/13/15			SURG PATH, LEVEL IV	0883052	33.38	
07/13/15			SURG PATH, LEVEL IV	0883052	33.38	
07/13/15			DECALCIFICATION	0883112	8.15	
07/13/15			DECALCIFICATION	0883112	8.15	
07/15/15			SURG PATH, LEVEL V	0883072	70.00	
07/17/15			SURG PATH, LEVEL IV	0883052	33.38	

CONTRACT:
U0715

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0715

STATEMENT DATE: 8/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
07/17/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/17/15			SURG PATH, LEVEL IV	0883052	33.38	
07/17/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/17/15			SURG PATH, LEVEL IV	0883052	33.38	
07/17/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/25/15			IMMUNOHISTOCHEMISTRY, EA	0883422	73.27	
07/31/15			SURG PATH, LEVEL IV	0883052	33.38	
07/25/15			IMMUNOHISTOCHEMISTRY, EA	0883422	40.00	
07/25/15			IMMUNOHISTOCHEMISTRY, EA	0883422	40.00	
07/23/15			SURG PATH, LEVEL IV	0883052	33.38	
07/23/15			SURG PATH, LEVEL IV	0883052	33.38	
07/26/15			SURG PATH, LEVEL IV	0883052	33.38	
07/26/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/26/15			SURG PATH, LEVEL IV	0883052	33.38	
07/26/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/24/15			SURG PATH, LEVEL IV	0883052	33.38	
07/24/15			SURG PATH, LEVEL IV	0883052	33.38	
07/24/15			SURG PATH, LEVEL IV	0883052	33.38	
07/24/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/24/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/16/15			SURG PATH, LEVEL II	0883022	24.18	
07/17/15			SURG PATH, LEVEL IV	0883052	33.38	
07/17/15			SURG PATH, LEVEL IV	0883052	33.38	
07/17/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0715

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0715

STATEMENT DATE: 8/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
07/17/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/17/15			SURG PATH, LEVEL IV	0883052	33.38	
07/17/15			SURG PATH, LEVEL IV	0883052	33.38	
07/17/15			SURG PATH, LEVEL II	0883022	24.18	
07/17/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/17/15			CYTOPATH, WASHINGS/BRUSH	0881042	29.46	
07/17/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/17/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/21/15			SURG PATH, LEVEL IV	0883052	33.38	
07/21/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/15/15			IMMUNOHISTOCHEMISTRY, EA	0883422	40.00	
07/15/15			SURG PATH, LEVEL IV	0883052	33.38	
07/15/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/17/15			SURG PATH, LEVEL V	0883072	70.00	
07/17/15			SURG PATH, LEVEL IV	0883052	33.38	
07/17/15			SURG PATH, LEVEL III	0883042	33.38	
07/21/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/21/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/17/15			IMMUNOHISTOCHEMISTRY, EA	0883422	40.00	
07/17/15			IMMUNOHISTOCHEMISTRY, EA	0883412	40.00	
07/17/15			IMMUNOHISTOCHEMISTRY, EA	0883412	40.00	
07/17/15			IMMUNOHISTOCHEMISTRY, EA	0883412	40.00	
07/21/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/21/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0715

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0715

STATEMENT DATE: 8/31/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
07/17/15			SURG PATH, LEVEL IV	0883052	33.38	
07/17/15			DECALCIFICATION	0883112	8.15	
07/22/15			SURG PATH, LEVEL V	0883072	70.00	
07/22/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/22/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/22/15			SURG PATH, LEVEL III	0883042	33.38	
07/22/15			CYTOPATH, THIN PREP METH	0881122	45.37	
07/22/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/22/15			SURG PATH, GROSS ONLY	0883002	10.20	
			Claim total:	8395.50		

CONTRACT:	CURRENT	OVER 30	OVER 60	OVER 90	OVER 120	AMOUNT DUE
U0715	3180.86	2223.17	2991.47	.00	.00	8395.50

08/15 - 8937.04

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0815

STATEMENT DATE: 9/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
08/17/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/17/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/18/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/09/15			SURG PATH, LEVEL IV	0883052	33.38	
08/09/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/10/15			SURG PATH, LEVEL IV	0883052	33.38	
08/19/15			SURG PATH, LEVEL II	0883022	24.18	
08/20/15			SURG PATH, LEVEL IV	0883052	33.38	
08/18/15			SURG PATH, LEVEL IV	0883052	33.38	
08/10/15			SURG PATH, LEVEL IV	0883052	33.38	
08/10/15			SURG PATH, LEVEL IV	0883052	33.38	
08/13/15			SURG PATH, LEVEL IV	0883052	33.38	
08/13/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/12/15			SURG PATH, LEVEL III	0883042	33.38	
08/13/15			SURG PATH, LEVEL IV	0883052	33.38	
08/13/15			SURG PATH, LEVEL IV	0883052	33.38	
08/25/15			SURG PATH, LEVEL V	0883072	70.00	
08/25/15			SURG PATH, LEVEL V	0883072	70.00	
08/25/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/25/15			SURG PATH, GROSS ONLY	0883002	10.20	
08/24/15			SURG PATH, LEVEL IV	0883052	33.38	
08/24/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/19/15			SURG PATH, LEVEL IV	0883052	33.38	
08/19/15			DECALCIFICATION	0883112	8.15	

CONTRACT:
U0815

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0815

STATEMENT DATE: 9/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
08/14/15			SURG PATH, LEVEL IV	0883052	33.38	
08/14/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/14/15			SURG PATH, LEVEL V	0883072	70.00	
08/14/15			DECALCIFICATION	0883112	8.15	
08/21/15			SURG PATH, LEVEL V	0883072	70.00	
08/21/15			DECALCIFICATION	0883112	8.15	
08/21/15			SURG PATH, LEVEL IV	0883052	33.38	
08/21/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/21/15			SURG PATH, LEVEL IV	0883052	33.38	
08/21/15			SURG PATH, LEVEL IV	0883052	33.38	
08/21/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/21/15			SURG PATH, LEVEL IV	0883052	33.38	
08/21/15			SURG PATH, LEVEL IV	0883052	33.38	
08/21/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/21/15			SURG PATH, LEVEL IV	0883052	33.38	
08/21/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/21/15			SURG PATH, LEVEL V	0883072	70.00	
08/21/15			SURG PATH, LEVEL IV	0883052	33.38	
08/21/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/24/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/24/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0815

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0815

STATEMENT DATE: 9/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
08/24/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/24/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/24/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/24/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/24/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/24/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/24/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/24/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/21/15			SURG PATH, LEVEL IV	0883052	33.38	
08/21/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/13/15			SURG PATH, LEVEL IV	0883052	33.38	
08/13/15			DECALCIFICATION	0883112	8.15	
08/14/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/14/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/14/15			SURG PATH, LEVEL IV	0883052	33.38	
08/14/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/14/15			SURG PATH, LEVEL IV	0883052	33.38	
08/14/15			SURG PATH, LEVEL IV	0883052	33.38	
08/14/15			SURG PATH, LEVEL IV	0883052	33.38	
08/14/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/14/15			SURG PATH, LEVEL IV	0883052	33.38	
08/14/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/13/15			SURG PATH, LEVEL IV	0883052	33.38	
08/13/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0815

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0815

STATEMENT DATE: 9/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
08/14/15			SURG PATH, LEVEL IV	0883052	33.38	
08/14/15			SURG PATH, LEVEL IV	0883052	33.38	
08/14/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/11/15			SURG PATH, LEVEL V	0883072	70.00	
08/11/15			SURG PATH, LEVEL V	0883072	70.00	
08/11/15			SPECIAL STAINS, GROUP II	0883132	55.88	
08/11/15			SPECIAL STAINS, GROUP II	0883132	55.88	
08/11/15			SPECIAL STAINS, GROUP II	0883132	55.88	
08/11/15			SPECIAL STAINS, GROUP II	0883132	55.88	
08/05/15			SURG PATH, LEVEL IV	0883052	33.38	
08/05/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/07/15			SURG PATH, LEVEL IV	0883052	33.38	
08/07/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/17/15			SURG PATH, LEVEL IV	0883052	33.38	
08/17/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/17/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/17/15			SURG PATH, LEVEL IV	0883052	33.38	
08/18/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/25/15			SURG PATH, LEVEL IV	0883052	33.38	
07/25/15			CYTOPATH, CONCENTRATION	0881082	61.49	
07/25/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/25/15			SURG PATH, LEVEL IV	0883052	33.38	
07/25/15			SURG PATH, LEVEL IV	0883052	33.38	
07/25/15			CYTOPATH, THIN PREP METH	0881122	36.31	

CONTRACT:
U0815

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0815

STATEMENT DATE: 9/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
07/25/15			CYTOPATH, THIN PREP METH	0881122	36.31	
07/25/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/25/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/27/15			SURG PATH, LEVEL IV	0883052	33.38	
07/27/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/27/15			FROZEN SECTION, 1ST SPEC	0883312	39.19	
07/27/15			FROZEN SECTION, 1ST SPEC	0883312	39.19	
07/27/15			SURG PATH, LEVEL IV	0883052	33.38	
07/27/15			SURG PATH, LEVEL IV	0883052	33.38	
07/29/15			SURG PATH, LEVEL IV	0883052	33.38	
07/29/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/29/15			SURG PATH, LEVEL IV	0883052	33.38	
07/29/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/29/15			SURG PATH, LEVEL IV	0883052	33.38	
07/29/15			SPECIAL STAINS, GROUP I	0883122	71.22	
07/29/15			SURG PATH, LEVEL III	0883042	33.38	
08/19/15			SURG PATH, LEVEL IV	0883052	33.38	
08/19/15			SURG PATH, LEVEL IV	0883052	33.38	
08/19/15			SURG PATH, LEVEL IV	0883052	33.38	
08/19/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/18/15			SURG PATH, LEVEL IV	0883052	33.38	
08/18/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/19/15			CYTOPATH, THIN PREP METH	0881122	36.31	
08/19/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0815

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0815

STATEMENT DATE: 9/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
08/19/15			FROZEN SECTION, 1ST SPEC	0883312	39.19	
08/19/15			SURG PATH, LEVEL IV	0883052	33.38	
08/19/15			FROZEN SECTION, 1ST SPEC	0883312	39.19	
08/19/15			SURG PATH, LEVEL IV	0883052	33.38	
08/18/15			SURG PATH, LEVEL IV	0883052	33.38	
08/18/15			SURG PATH, LEVEL IV	0883052	33.38	
08/18/15			DECALCIFICATION	0883112	8.15	
08/18/15			DECALCIFICATION	0883112	8.15	
08/19/15			CYTOPATH, THIN PREP METH	0881122	36.31	
08/19/15			CYTOPATH, THIN PREP METH	0881122	36.31	
08/19/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/19/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/19/15			SURG PATH, LEVEL IV	0883052	33.38	
08/19/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/19/15			SURG PATH, LEVEL IV	0883052	33.38	
08/19/15			SURG PATH, LEVEL IV	0883052	33.38	
08/24/15			FNA, INTERP/REPORT	0881732	79.82	
08/24/15			SURG PATH, LEVEL IV	0883052	33.38	
08/24/15			FNA ADEQUACY EVALUATION	0881722	19.76	
08/28/15			SURG PATH, LEVEL IV	0883052	33.38	
08/28/15			SURG PATH, LEVEL IV	0883052	33.38	
08/28/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/28/15			SURG PATH, LEVEL IV	0883052	33.38	
08/28/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0815

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0815

STATEMENT DATE: 9/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
08/28/15			SURG PATH, LEVEL IV	0883052	33.38	
08/28/15			SURG PATH, LEVEL IV	0883052	33.38	
08/28/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/28/15			SURG PATH, LEVEL II	0883022	24.18	
08/28/15			CYTOPATH, THIN PREP METH	0881122	36.31	
08/28/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/31/15			SURG PATH, LEVEL IV	0883052	33.38	
08/31/15			SURG PATH, LEVEL III	0883042	33.38	
08/31/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/29/15			SURG PATH, LEVEL IV	0883052	33.38	
07/24/15			* CHARGE REVERSAL *	8834213	40.00-	
07/24/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
07/24/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
07/26/15			* CHARGE REVERSAL *	8834213	40.00-	
07/26/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
07/27/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
08/05/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
08/05/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
08/07/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
08/17/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
08/17/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
08/17/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
08/18/15			IMMUNOHISTOCHEMISTRY, EA	8834213	29.00	
08/18/15			SURG PATH, LEVEL IV	0883052	33.38	

CONTRACT:
U0815

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0815

STATEMENT DATE: 9/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
08/18/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/31/15			SURG PATH, LEVEL IV	0883052	33.38	
08/31/15			DECALCIFICATION	0883112	8.15	
08/31/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/31/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/29/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/29/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/29/15			CYTOPATH, WASHINGS/BRUSH	0881042	29.46	
08/29/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/29/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/29/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/29/15			CYTOPATH, THIN PREP METH	0881122	45.37	
08/29/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/29/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/31/15			SURG PATH, LEVEL III	0883042	33.38	
08/31/15			SURG PATH, LEVEL IV	0883052	33.38	
08/31/15			DECALCIFICATION	0883112	8.15	
08/31/15			SURG PATH, LEVEL IV	0883052	33.38	
08/26/15			SURG PATH, LEVEL V	0883072	70.00	
08/26/15			SURG PATH, LEVEL IV	0883052	33.38	
08/26/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/26/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/26/15			SPECIAL STAINS, GROUP I	0883122	71.22	
08/26/15			SPECIAL STAINS, GROUP I	0883122	71.22	

CONTRACT:
U0815

AMOUNT DUE
* CONTINUED *

BAYLOR PATHOLOGY CONSULTANTS
P O BOX 4698
HOUSTON, TX 77210-4698

800 262-8848

TAX ID NO.: 760495836

CONTRACT: U0815

STATEMENT DATE: 9/30/15

UNIVERSITY GENERAL HOSPITAL
7501 FANNIN
ATTN HARMONEE VICE, CFO
HOUSTON, TX 77054-0000

DATE	PATIENT NO.	PATIENT NAME	PROCEDURE	CODE	AMOUNT	AMOUNT
Claim total:				8937.04		

CONTRACT:	CURRENT	OVER 30	OVER 60	OVER 90	OVER 120	AMOUNT DUE
U0815	4193.62	4743.42	.00	.00	.00	8937.04

Exhibit 3

Exhibit 4

Summary of Medical Directorship Administrative Expense Claim Payable to
Community Pathology P.L.L.C.

Month	Amount Due	Claim
March 2015	\$2,500	\$2,500
April 2015	\$2,500	\$2,500
May 2015	\$2,500	
June 2015	\$2,500	
July 2015	\$2,500	\$2,500
August 2015	\$2,500	
September 2015	\$2,500	
October 2015	\$2,500	
November 2015	\$2,500	
Balance Due	\$22,500	\$15,000 remaining



University General Hospital
Attn: Rusty Brown
7501 Fannin St
Houston, TX 77054

Account Statement	
Date	5/13/2015
Receivables Representative	Jeretta Hamilton
Telephone	713-798-5889
Fax	713-798-1441
Email	chenever@bcm.edu
Your account with us	131660015

Statement as of 04/30/2015
Invoice No: 131660015-201504
Medical Director- Pathology

Balance as of 08/30/2014	30,000.00
Sep-14	2,500.00
Oct-14	2,500.00
Nov-14	2,500.00
Dec-14	2,500.00
Jan-15	2,500.00
Feb-15	2,500.00
Mar-15	2,500.00
Apr-15	2,500.00
Amount Due	50,000.00

Karen Mills

Karen Mills
Director, Affiliated Finance Administration

Submit payments to Baylor College of Medicine, P.O. Box 301207, Dallas, TX 76303-1207
Please reference account number 131660015-201504 when remitting.



University General Hospital
Attn: Rusty Brown
7501 Fannin St
Houston, TX 77054

Account Statement	
Date	6/15/2015
Receivables Representative	Jeretta Hamilton
Telephone	713-798-5889
Fax	713-798-1441
Email	cheneven@bcm.edu
Your account with us	131660015

Statement as of 05/31/2015
Invoice No: 131660015-201505
Medical Director- Pathology

Payroll	0.00
Retro Corrections	0.00
Miscellaneous	2,500.00
Amount Due	2,500.00

Karen Mills
Director, Affiliated Finance Administration

Submit payments to Baylor College of Medicine, P.O. Box 301207, Dallas, TX 75303-1207
Please reference account number 131660015-201505 when remitting.
Payments received after 05/31/2015 are not included.



University General Hospital
Attn: Rusty Brown
7501 Fannin St
Houston, TX 77054

Account Statement	
Date	7/13/2015
Receivables Representative	Jeretta Hamilton
Telephone	713-798-5889
Fax	713-798-1441
Email	cheneven@bcm.edu
Your account with us	131660015

Statement as of 06/30/2015
Invoice No: 131660015-201506
Medical Director- Pathology

Payroll	0.00
Retro Corrections	0.00
Miscellaneous	2,500.00
Amount Due	2,500.00

Karen Mills
Director, Affiliated Finance Administration

Submit payments to Baylor College of Medicine, P.O. Box 301207, Dallas, TX 75303-1207
Please reference account number 131660015-201506 when remitting.
Payments received after 06/30/2015 are not included.



University General Hospital
Attn: Rusty Brown
7501 Fannin St
Houston, TX 77054

Account Statement	
Date	8/10/2015
Receivables Representative	Jeretta Hamilton
Telephone	713-798-5889
Fax	713-798-1441
Email	chenever@bcm.edu
Your account with us	131660015

Statement as of 07/31/2015
Invoice No: 131660015-201507
Medical Director- Pathology

Payroll	0.00
Retro Corrections	0.00
Miscellaneous	2,500.00
Amount Due	2,500.00

Karen Mills
Director, Affiliated Finance Administration

Submit payments to Baylor College of Medicine, P.O. Box 301207, Dallas, TX 75303-1207
Please reference account number 131660015-201507 when remitting.
Payments received after 07/31/2015 are not included.



University General Hospital
Attn: Rusty Brown
7501 Fannin St
Houston, TX 77054

Account Statement	
Date	9/25/2015
Receivables Representative	Teela D. Glenn
Telephone	713-798-3131
Fax	713-798-1441
Email	tglen@bcm.edu
Your account with us	131660015

Statement as of 08/31/2015
Invoice No: 131660015-201508
Medical Director- Pathology

Payroll	0.00
Retro Corrections	0.00
Miscellaneous	2,500.00
Amount Due	2,500.00

Karen Mills

Karen Mills
Director, Affiliated Finance Administration

Submit payments to Baylor College of Medicine, P.O. Box 301207, Dallas, TX 75303-1207
Please reference account number 131660015-201508 when remitting.
Payments received after 08/31/2015 are not included.



University General Hospital
Attn: Rusty Brown
7501 Fannin St
Houston, TX 77054

Account Statement	
Date	11/16/2015
Receivables Representative	Teela D. Glenn
Telephone	713-798-3131
Fax	713-798-1441
Email	tglenn@bcm.edu
Your account with us	131660015

Statement as of 10/31/2015
Invoice No: 131660015-201510
Medical Director- Pathology

Payroll	0.00
Retro Corrections	0.00
Miscellaneous	2,500.00
Amount Due	2,500.00


Karen Mills
Director, Affiliated Finance Administration

Submit payments to Baylor College of Medicine, P.O. Box 301207, Dallas, TX 75303-1207
Please reference account number 131660015-201510 when remitting.
Payments received after 09/30/2015 are not included.




University General Hospital
Attn: Rusty Brown
7501 Fannin St
Houston, TX 77054

Account Statement	
Date	12/14/2015
Receivables Representative	Teela D. Glenn
Telephone	713-798-3131
Fax	713-798-1441
Email	tglenn@bcm.edu
Your account with us	131660015

Statement as of 11/30/2015
Invoice No: 131660015-201511
Medical Director- Pathology

Payroll	0.00
Retro Corrections	0.00
Miscellaneous	2,500.00
Amount Due	2,500.00



Karen Mills
Director, Affiliated Finance Administration

Submit payments to Baylor College of Medicine, P.O. Box 301207, Dallas, TX 75303-1207
Please reference account number 131660015-201511 when remitting.
Payments received after 10/31/2015 are not included.

Exhibit B

Date	Amount
12/28/2015	\$33.38
12/28/2015	\$33.38
12/28/2015	\$71.22
12/24/2015	\$45.37
12/24/2015	\$71.22
12/22/2015	\$87.00
12/22/2015	\$33.38
12/22/2015	\$55.88
12/22/2015	\$33.38
12/22/2015	\$33.38
12/22/2015	\$8.15
12/22/2015	\$8.15
12/22/2015	\$45.37
12/22/2015	\$71.22
12/18/2015	\$70.00
12/18/2015	\$33.38
12/18/2015	\$33.38
12/18/2015	\$33.38
12/18/2015	\$33.38
12/18/2015	\$8.15
12/3/2015	\$33.38
12/3/2015	\$33.38
12/3/2015	\$33.38
12/3/2015	\$33.38
12/3/2015	\$8.15
12/3/2015	\$8.15
12/3/2015	\$8.15
12/3/2015	\$8.15
12/8/2015	\$33.38
12/8/2015	\$71.22
12/11/2015	\$33.38
12/11/2015	\$33.38
12/11/2015	\$33.38
12/11/2015	\$8.15
12/11/2015	\$8.15
12/11/2015	\$8.15

Date	Amount
12/22/2015	\$33.38
12/22/2015	\$71.22
12/22/2015	\$33.38
12/19/2015	\$45.37
12/19/2015	\$71.22
12/19/2015	\$45.37
12/19/2015	\$71.22
12/19/2015	\$33.38
12/19/2015	\$33.38
12/19/2015	\$33.38
12/19/2015	\$71.22
12/19/2015	\$71.22
12/21/2015	\$33.38
12/21/2015	\$33.38
12/21/2015	\$71.22
12/18/2015	\$45.37
12/18/2015	\$45.37
12/18/2015	\$71.22
12/18/2015	\$71.22
12/17/2015	\$45.37
12/17/2015	\$33.38
12/17/2015	\$45.37
12/18/2015	\$45.37
12/18/2015	\$29.46
12/18/2015	\$71.22
12/18/2015	\$45.37
12/18/2015	\$71.22
12/14/2015	\$33.38
12/17/2015	\$45.37
12/17/2015	\$71.22
12/14/2015	\$33.38
12/14/2015	\$8.15
12/14/2015	\$33.38
12/14/2015	\$71.22
12/14/2015	\$46.13
12/15/2015	\$70.00
12/11/2015	\$29.00
12/11/2015	\$33.38

Date	Amount
12/11/2015	\$71.22
12/9/2015	\$45.37
12/9/2015	\$71.22
12/9/2015	\$70.00
12/9/2015	\$71.22
12/10/2015	\$33.38
12/10/2015	\$33.38
12/10/2015	\$33.38
12/10/2015	\$33.38
12/10/2015	\$33.38
12/10/2015	\$33.38
12/10/2015	\$33.38
12/10/2015	\$33.38
12/10/2015	\$33.38
12/10/2015	\$33.38
12/10/2015	\$33.38
12/10/2015	\$33.38
12/8/2015	\$33.38
12/8/2015	\$71.22
12/7/2015	\$33.38
12/7/2015	\$33.38
12/7/2015	\$71.22
12/7/2015	\$70.00
12/4/2015	\$33.38
12/4/2015	\$33.38
12/4/2015	\$71.22
12/4/2015	\$71.22
12/4/2015	\$33.38
12/4/2015	\$71.22
12/4/2015	\$33.38
12/4/2015	\$71.22
12/4/2015	\$33.38
12/4/2015	\$8.15
12/4/2015	\$33.38
12/4/2015	\$71.22
12/2/2015	\$33.38
12/1/2015	\$45.37
12/1/2015	\$45.37
12/1/2015	\$71.22

Date	Amount
11/24/2015	\$33.38
11/24/2015	\$33.38
11/24/2015	\$33.38
11/24/2015	\$71.22
11/24/2015	\$33.38
11/24/2015	\$71.22
11/30/2015	\$33.38
11/25/2015	\$33.38
11/25/2015	\$8.15
11/25/2015	\$33.38
11/25/2015	\$33.38
11/25/2015	\$71.22
11/24/2015	\$33.38
11/24/2015	\$33.38
11/25/2015	\$45.37
11/25/2015	\$71.22
11/25/2015	\$71.22
11/24/2015	\$33.38
11/24/2015	\$71.22
11/24/2015	\$33.38
11/24/2015	\$71.22
11/25/2015	\$45.37
1/20/2016	\$2,500.00
Total:	\$8,383.76

Exhibit C

Date	Amount
6/9/2015	\$71.22
9/25/2015	\$87.00
9/24/2015	\$71.00
9/24/2015	\$71.00
9/24/2015	\$71.00
9/24/2015	\$71.00
11/18/2015	\$45.37
11/18/2015	\$45.37
11/14/2015	\$45.37
11/14/2015	\$45.37
11/14/2015	\$71.22
11/14/2015	\$71.22
10/8/2015	\$33.38
10/26/2015	\$45.37
10/26/2015	\$71.22
10/28/2015	\$73.00
10/28/2015	\$22.97
10/28/2015	\$33.38
10/20/2015	\$33.38
10/27/2015	\$33.38
10/27/2015	\$33.38
10/27/2015	\$71.22
10/27/2015	\$71.22
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$71.22
10/29/2015	\$71.22
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$33.38

Date	Amount
10/29/2015	\$33.38
10/29/2015	\$33.38
10/29/2015	\$71.22
10/29/2015	\$71.22
10/29/2015	\$33.38
10/29/2015	\$33.38
10/30/2015	\$33.38
10/30/2015	\$33.38
10/30/2015	\$33.38
10/30/2015	\$71.22
10/30/2015	\$71.22
10/30/2015	\$33.38
10/30/2015	\$71.22
10/30/2015	\$33.38
10/30/2015	\$33.38
10/30/2015	\$71.22
11/20/2015	\$33.38
11/20/2015	\$71.22
11/20/2015	\$8.15
11/2/2015	\$33.38
11/2/2015	\$71.22
11/2/2015	\$33.38
11/2/2015	\$71.22
11/2/2015	\$33.38
11/2/2015	\$71.22
11/2/2015	\$33.38
11/2/2015	\$71.22
11/2/2015	\$71.22
10/21/2015	\$33.38
10/21/2015	\$8.15
10/30/2015	\$33.38
10/30/2015	\$33.38
10/30/2015	\$8.15
10/30/2015	\$8.15
11/2/2015	\$10.20
11/4/2015	\$33.38
11/4/2015	\$8.15
11/1/2015	\$33.38
11/1/2015	\$71.22
11/2/2015	\$24.18

Date	Amount
11/2/2015	\$24.18
11/11/2015	\$33.38
11/11/2015	\$71.22
11/10/2015	\$33.38
11/9/2015	\$33.38
11/9/2015	\$33.38
11/9/2015	\$8.15
11/9/2015	\$8.15
11/11/2015	\$33.38
11/11/2015	\$71.22
11/12/2015	\$33.38
11/12/2015	\$33.38
11/12/2015	\$33.38
11/12/2015	\$71.22
11/12/2015	\$71.22
11/9/2015	\$45.37
11/9/2015	\$45.37
11/9/2015	\$45.37
11/9/2015	\$29.46
11/9/2015	\$71.22
11/9/2015	\$71.22
11/9/2015	\$71.22
11/18/2015	\$70.00
11/18/2015	\$70.00
11/18/2015	\$70.00
11/18/2015	\$110.00
11/18/2015	\$110.00
11/18/2015	\$110.00
11/18/2015	\$75.00
11/18/2015	\$75.00
11/18/2015	\$33.38
11/18/2015	\$33.38
11/18/2015	\$33.38
11/20/2015	\$29.00
11/20/2015	\$29.00
11/20/2015	\$29.00
11/20/2015	\$29.00
11/20/2015	\$29.00
11/20/2015	\$29.00
11/20/2015	\$73.00

Date	Amount
11/20/2015	\$33.38
11/20/2015	\$22.97
11/20/2015	\$33.38
11/20/2015	\$71.22
11/20/2015	\$33.38
11/17/2015	\$33.38
11/17/2015	\$33.38
11/17/2015	\$8.15
11/17/2015	\$8.15
11/16/2015	\$33.38
11/16/2015	\$33.38
11/16/2015	\$71.22
11/13/2015	\$33.38
11/13/2015	\$33.38
11/13/2015	\$33.38
11/16/2015	\$70.00
11/13/2015	\$70.00
11/13/2015	\$33.38
11/18/2015	\$70.00
11/11/2015	\$33.38
11/11/2015	\$8.15
11/17/2015	\$33.38
11/17/2015	\$71.22
11/6/2015	\$33.38
11/6/2015	\$71.22
11/6/2015	\$45.37
11/6/2015	\$45.37
11/6/2015	\$71.22
11/6/2015	\$71.22
11/6/2015	\$33.38
11/6/2015	\$33.38
11/6/2015	\$33.38
11/6/2015	\$71.22
11/4/2015	\$33.38
11/4/2015	\$45.37
11/9/2015	\$33.38
11/9/2015	\$71.22
11/9/2015	\$33.38
11/9/2015	\$33.38
11/9/2015	\$33.38

Date	Amount
11/9/2015	\$71.22
11/9/2015	\$71.22
11/9/2015	\$33.38
11/10/2015	\$45.37
11/10/2015	\$71.22
11/10/2015	\$45.37
11/10/2015	\$71.22
11/10/2015	\$45.37
11/10/2015	\$71.22
11/10/2015	\$33.38
11/9/2015	\$33.38
11/9/2015	\$33.38
11/9/2015	\$71.22
11/9/2015	\$71.22
11/9/2015	\$70.00
11/9/2015	\$70.00
11/20/2015	\$33.38
10/5/2015	\$115.00
10/5/2015	\$39.19
10/5/2015	\$39.19
10/5/2015	\$75.00
10/5/2015	\$33.38
10/5/2015	\$39.19
10/5/2015	\$33.38
10/5/2015	\$33.38
10/5/2015	\$33.38
10/14/2015	\$45.37
10/2/2015	\$33.38
10/2/2015	\$71.22
10/2/2015	\$33.38
10/2/2015	\$95.00
10/21/2015	\$45.37
10/21/2015	\$45.37
10/21/2015	\$71.22
10/21/2015	\$45.37
10/21/2015	\$45.37
10/21/2015	\$71.22
10/21/2015	\$29.46
10/19/2015	\$33.38
10/20/2015	\$33.38

Date	Amount
10/20/2015	\$71.22
10/16/2015	\$33.38
10/2/2015	\$33.38
10/5/2015	\$45.37
10/5/2015	\$33.38
10/5/2015	\$33.38
10/5/2015	\$33.38
10/5/2015	\$45.37
10/5/2015	\$33.38
10/5/2015	\$33.38
10/5/2015	\$0.00
10/5/2015	\$0.00
10/20/2015	\$24.18
10/19/2015	\$45.37
10/19/2015	\$45.37
10/19/2015	\$29.46
10/19/2015	\$71.22
10/19/2015	\$45.37
10/19/2015	\$71.22
10/9/2015	\$70.00
10/9/2015	\$33.38
10/9/2015	\$8.15
10/14/2015	\$45.37
10/14/2015	\$45.37
10/14/2015	\$71.22
10/14/2015	\$71.22
10/7/2015	\$33.38
10/12/2015	\$33.38
10/6/2015	\$45.37
10/6/2015	\$71.22
10/6/2015	\$45.37
10/6/2015	\$71.22
10/6/2015	\$45.37
10/6/2015	\$71.22
10/7/2015	\$33.38
10/7/2015	\$71.22
10/7/2015	\$33.38
10/7/2015	\$71.22
10/6/2015	\$33.38
10/8/2015	\$45.37

Date	Amount
10/8/2015	\$45.37
10/8/2015	\$29.46
10/8/2015	\$71.22
10/8/2015	\$71.22
10/8/2015	\$71.22
10/8/2015	\$33.38
10/8/2015	\$33.38
10/8/2015	\$45.37
10/8/2015	\$71.22
10/9/2015	\$33.38
10/9/2015	\$71.22
10/9/2015	\$33.38
10/9/2015	\$33.38
10/9/2015	\$33.38
10/9/2015	\$71.22
10/9/2015	\$71.22
10/8/2015	\$33.38
10/9/2015	\$33.38
10/9/2015	\$71.22
10/2/2015	\$33.38
10/2/2015	\$71.22
10/21/2015	\$33.38
10/22/2015	\$45.37
10/22/2015	\$71.22
10/22/2015	\$33.38
10/22/2015	\$33.38
10/21/2015	\$70.00
10/21/2015	\$70.00
10/21/2015	\$71.22
10/12/2015	\$29.00
10/12/2015	\$29.00
10/12/2015	\$29.00
10/12/2015	\$29.00
10/12/2015	\$29.00
10/12/2015	\$33.38
10/12/2015	\$45.37
10/12/2015	\$55.88
10/2/2015	\$33.38
10/2/2015	\$33.38
10/16/2015	\$33.38
10/16/2015	\$8.15

Date	Amount
10/12/2015	\$33.38
10/12/2015	\$71.22
10/12/2015	\$33.38
10/12/2015	\$33.38
10/12/2015	\$33.38
10/12/2015	\$71.22
10/23/2015	\$33.38
10/23/2015	\$33.38
10/23/2015	\$33.38
10/23/2015	\$33.38
10/23/2015	\$33.38
10/23/2015	\$33.38
10/21/2015	\$70.00
10/21/2015	\$8.15
10/23/2015	\$33.38
10/23/2015	\$8.15
10/26/2015	\$33.38
10/26/2015	\$45.37
10/26/2015	\$33.38
10/26/2015	\$71.22
10/22/2015	\$33.38
10/22/2015	\$73.27
10/23/2015	\$33.38
10/26/2015	\$33.38
10/26/2015	\$71.22
10/26/2015	\$33.38
Total:	\$14,032.31